## P24000024301

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: N S N 88 INC		
	1BER: P24000024301		
	es of Amendment and fee are su	bmitted for filling.	
Please return all cor	respondence concerning this ma	tter to the following:	
	TAMMY HARRIS		•
		Name of Contact Persor	1
	A-1 TAX SERVICE INC		
		Firm/ Company	
	953 OLD DIXIE HWY STE	· ·	
		Address	
	VERO BEACH, FL 32960		
	<del></del>	City/ State and Zip Code	
	tammya l tax@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
TAMMY HARRIS		772	257-6346
TAMMY HARRIS at (772 ) 257-6346  Name of Contact Person Area Code & Daytime Telephone		de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

N S N 88 INC

(Name of Corporation as curren	ntly filed with the Florida Dept. of	State)
P2400002430		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, thats Articles of Incorporation:	is Florida Profit Corporation adop	is the following amendment(s) to
A. If amending name, enter the new name of the corporation:		Th.,
name must be distinguishable and contain the word "corporation,"	"company" or "incorporated" or	The new the abbreviation "Corn"
"Inc.," or Co.," or the designation "Corp," "Inc." or "Co".	A professional corporation name	
"chartered," "professional association," or the abbreviation "P.A	1. "	24
B. Enter new principal office address, if applicable:		SF
(Principal office address MUST BE A STREET ADDRESS)		
		F. 30
		5. 6.
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
	<del></del> .	
		<del></del>
75 16 11 11 11 16 11 11 11 11 11 11 11 11	Harrista Phashia and akan nama	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		ot the
	<del></del>	
Name of New Registered Agent		
(Florida	street address)	
N. B 1000 (11)	171	tani In
New Registered Office Address:	(Cin)	orida <i>(Zip Code)</i>
	7.5	,
New Registered Agent's Signature, if changing Registered Age		
New Registered Agent's Signature, it changing Registered Age I hereby accept the appointment as registered agent.—I am familia		the position.
and the second of the second o	,	•
Signature of New	Registered Agent, if changing	<del></del>
Check if applicable		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President: T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Snuth	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	TR	KHAMSING, SUPO	110 SPRING LAKE CT APT 104
Add		. Sizawaphi Yorker	VERO BEACH, FL 32962
X Remove 2) Change	<u>S</u>	Pongsai, Supau	vero BEACH, FL 32962  vad. 44 Plentation of April 2005  Vero Beach, 71 32946
Add			Vero Beach, #1 32946
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ding additional Art heets, if necessary).	(Be specific)				
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f an amendme <u>nt r</u>	provides for an exc	<u>hange, reclassi</u>	ification, or car	ncellation of iss	ued shares,	
provisions for imp	plementing the amoble, indicate N/A)	<u>endment if not</u>	contained in t	<u>he amendment</u>	<u>itself:</u>	
(у погируния	me, materie sway					
		<u> </u>				
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	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment of the approval.	ent(s)
	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes case	for the amendment(s) was/were sufficient for approval	
by	,··	
	(voting group)	
selecte	hrector, president or other officer – if directors or officers have not be ed, by an incorporator – if in the hands of a receiver, trustee, or other officers have not be earlier to the contract of the hands of a receiver.	
appoir	nted fiduciary by that fiduciary)	
	LUKSIKA BRIDGES	
	(Typed or printed name of person signing)	
	PRES	
	(Title of person signing)	