## P24000024301

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Secretary of State
TALLAHASSEE, FL



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, Fl. 32314

NAME OF CORPOR	RATION: N S N 88 INC		<u>-</u>	
DOCUMENT NUMB	BER: P24000024301			
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence 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	E B19		
Address				
	VERO BEACH, FL 32960			
		City/ State and Zip Code	2	
	tammya1tax@g <b>rai</b> ].com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
TAMMY HARRIS		at ( <u>772</u>	257-6346	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	r the following amount made	payable to the Florida Depa	ortment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divi	ling Address indment Section sion of Corporations Box 6327	Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

2024 NOV 13 PM 7: 2

## Articles of Amendment to Articles of Incorporation of

N S N 88 INC

Check if applicable

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

(Name of Corporation :	is currently filed with th	e Florida Dept. of State)		<del>.</del>
P24000024301				
(Document	Number of Corporation (	(if known)		
Pursuant to the provisions of section 607.1006, Florida Statista Articles of Incorporation:	atutes, this Florida Profit	Corporation adopts the fol	llowing amen	dment(s) to
A. If amending name, enter the new name of the corpo	oration:			
		<del></del>	The	
name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbrevia	· "Co". A professional	"incorporated" or the abbr corporation name must o	eviation "Cor contain the v	rp.," vord
B. Enter new principal office address, if applicable:				
(Principal office address MUST BE A STREET ADDRE	<u>(SS</u> )			
		·		
	<del></del>		( <u>/)</u>	202
C. Enter new mailing address, if applicable:			전유 전유	AON 1202
(Mailing address MAY BE A POST OFFICE BOX)				_ ¥
			出	13
	<del></del>		<del>- 600</del>	유
			<u> </u>	
D 16	ce that Ellin		FI	: 2
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		i, enter the name of the	, E	0
Name of New Registered Agent	· · ·	<u> </u>	<del></del> -	
	(Florida street address)			
New Registered Office Address:		, Florida		
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	red Agent: n familiar with and accen	t the obligations of the nov	ition	
Turing society in approximent as regimered agent. Turi	a yammar man ana accep	. The confidences of the pos		
Signatur	e of New Registered Ager	nt, if changing	<del></del>	

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

Attach additional sheets, if necessary)

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

" = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief 'xecutive 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.

hanges 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 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, tike Jones, V as Remove, and Sally Smith, SV as an Add.

l <b>xample:</b> <u>X</u> Change	PT	John I	<u> 20c</u>	
X Remove	$\underline{V}$	Mike.	Jones	
X Add	<u>sv</u>	Sally S	<u>Smith</u>	
ype of Action Check One)	<u>Title</u>		Name	<u>Addres</u> s
) Change Add Remove				
) Change	VP		THADPONG RIANCHOB	7000 20th STREET LOTE STREET L
Add  Remove Change  Add	VP	_	SUPAWADI PONGSAL	VERO BEACH, FL 3296 APT 205 FAT 205 FAT 205 FAT 205
Remove ) Change Add		<del></del>		VERD BEACH, FL 32946
Remove		_		
Add Remove ) Change				
Add		_		
				<del> </del>

amending or adding additional Articles, enter change(s) here: ttach additional sheets, if necessary). (Be specific)	
(De aproduce)	
<del> </del>	<del></del>
	<del></del>
	SECRETARY OF STATE TALLAHASSEE, FL
	三 色常 吾
	- <del></del>
	SS O
	, F
	17.0
an amendment provides for an exchange, reclassification, or cancellation of issued shares,	,
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
	<u>.</u>

The date of each amendment(s) a late this document was signed.	doption:	, if other t	than the
Effective date if applicable:	(no more than 90 days after amendment file date)		
	(no more than 90 days after amendment file date)		
<b>Note:</b> If the date inserted in this blocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this darpartment of State's records.	te will not be liste	d as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action	on and shareholder	
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) officient for approval.	s)	
	proved by the shareholders through voting groups. The following statemed each voting group entitled to vote separately on the amendment(s):	ent .	
"The number of votes cast	for the amendment(s) was/were sufficient for approval		
by	,,"		ī-
	(voting group)		•
10-30-2024 Dated	,	2024 NOV 13 PM 7: 20 SECRETARY OF STATE TALLAHASSEE, FL	
Signature LV	kgika Bridges.	AAR)	
selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)	PH 7: ( OF ST SSEE, F	U
	Luksika Bridges	ATE ATE	
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		