Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : DMG FINANCIAL SERVICES INC

Account Number : I20230000151 Phone : (305)595-2407

Fax Number : (305)595-2408

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN **EDY'S ENTERPRISE INC**

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$35.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

TO: Amendment Section

Tallahassee, FL 32314

COVER LETTER

| Division of Cor | porations | | | |
|-----------------------------------|---|--|--|-----------------|
| NAME OF CORPO | PRATION: EDY'S ENTERPR | RISE INC | | |
| DOCUMENT NUM | P24000020005 | | | _ |
| The enclosed Article | s of Amendment and fee are su | abmitted for filing. | | |
| Please return all corr | espondence concerning this ma | otter to the following: | | |
| | MARIA E RUIZ | | | |
| | | Name of Contact Perso | <u> </u> | |
| | L & M ACCOUNTING SER | RVICES INC | | |
| | | Firm/ Company | | |
| | 7750 SW 117TH AVE SUIT | TE 203 | | |
| | MIAMI FLORIDA 33183 | Address | | |
| | | City/ State and Zip Cod | e | : . |
| | MARIAQUIROS9@HOTM | AIL.COM | | |
| | E-mail address: (to be us | sed for future annual report | notification) | - 35 - |
| For further informati | on concerning this matter, plea | se cali: | | Öi, |
| MARIA E RUIZ | | 305 at (| 595-2407 | |
| Name | of Contact Person | Area Co | de & Daytime Telephone N | umber |
| Enclosed is a check f | or the following amount made | payable to the Florida Dep. | artment of State: | |
| ■ \$35 Filing Fec | S43.75 Filing Fee & Certificate of Status | ☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| Mailing Address Amendment Section | | | Address Iment Section | |
| | vision of Corporations D. Box 6327 | Divisio | on of Corporations | |

FILED
2024 HAY 31 AM 9: 22

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment

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| ly filed with the Florida Dept. of State |) | | |
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| of Corporation (if known) | | | |
| Florida Profit Corporation adopts the fo | ollowing | amendn | nent(s) t |
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| a projessional corporation name musi | | | |
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| | <u> </u> | 24 | |
| 14221 SW 94 CIR LANE APT 101 |) 3 50 | IAY31 | |
| MIAMI FLORIDA 33186 | SU | A | in |
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| dress in Florida, enter the name of the | · · · · · · · · · · · · · · · · · · · | 22 | |
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| treet address) | | | |
| | | | |
| . Florida | | | |
| | Of Corporation (if known) Florida Profit Corporation adopts the finance of the abbit of professional corporation name must. 14221 SW 94 CIR LANE APT 101 MIAMI FLORIDA 33186 dress in Florida, enter the name of the ass. | Of Corporation (if known) Florida Profit Corporation adopts the following of Company, "or "incorporated" or the abbreviation of A professional corporation name must contain " 14221 SW 94 CIR LANE APT 101 MIAMI FLORIDA 33186 | The ne company, "or "incorporation name must contain the wor." 14221 SW 94 CIR LANE APT 101 MIAMI FLORIDA 33186 Michael St. 1422 SW 94 CIR LANE APT 101 Michael Florida, enter the name of the st. 1422 SW 94 CIR LANE APT 101 Michael Florida, enter the name of the st. 1422 SW 94 CIR LANE APT 101 Michael Florida, enter the name of the st. 1422 SW 94 CIR LANE APT 101 |

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

| If amending the Officers and/or Directors, enter the title and name of each officer/director being removed a | nd title, na | ime, 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> | J <u>ohn Doe</u> | |
|----------------------------|-----------|------------------|-----------------|
| X Remove | <u>v</u> | Mike Jones | |
| _X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | | | |
| Add | | | 2024 |
| Remove | | | 2024 H.AY 3 |
| 2) Change | | | ω <u>-</u> ′, |
| Add | | | |
| Remove Change | | | 9 22 |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | _ | |
| Add | | | |
| Remove | | | |
| 6)Change | | | |
| Add | | | |
| Remove | | | |

| Attach additional sheets | s, if necessary). | cles, enter change(s) her (Be specific) | | | | |
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| If an amendment are | vides for an exc | hange, reclassification, o | r cancellation of issued | shares, | | |
| provisions for imple | menting the am | endment if not contained | in the amendment itse | <u>lf:</u> | | |
| (if not applicable | , indicate N/A) | | | | | |
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| | 05/31/2024 | , if other than the |
|--|--|--------------------------|
| The date of each amendment(s) adoption date this document was signed. | | , If other than the |
| 06/04/2024 | 1 | |
| Effective date if applicable: | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block d document's effective date on the Department | nes not meet the applicable statutory filing requirements, this date went of State's records. | ill not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were adopted baction was not required. | y the incorporators, or board of directors without shareholder action a | nd shareholder |
| ☐ The amendment(s) was/were adopted by the shareholders was/were sufficient | by the shareholders. The number of votes east for the amendment(s) at for approval. | F 1 1 2024 HAY 3 |
| ☐ The amendment(s) was/were approved must be separately provided for each | by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s): | , |
| "The number of votes east for the | e amendment(s) was/were sufficient for approval | |
| by | (voting group) | # 22 |
| Dated | 4 | |
| Signature | Call | |
| selected, by a | r, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary) | |
| ELIZ | ABETH CORDOBA | |
| | (Typed or printed name of person signing) | |
| PRE | SIDENT | |
| - | (Title of person signing) | |