P24000046088

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2024 DEC -4 PM 2: 52 SECRETARY OF STATE TALLAHASSEE, FL

COVER LETTER

D: Amendment Section Division of Corporations

CLEM AME OF CORPORATION:	ATIS STREET MARKET CORPORATION	
P24000046 OCUMENT NUMBER:	088	
he enclosed Articles of Amendment an	nd fee are submitted for filing.	
lease return all correspondence concert	ning this matter to the following:	
MICHELE HOL	MES	
	Name of Contact Person	
CLEMATIS STR	REET MARKET CORPORATION	
	Firm/ Company	_
537 CLEMATIS	• •	
	Address	—
WEST PALM BI	EACH, FL 33401	
 	City/ State and Zip Code	<u> </u>
CLEMATISSTR	EETMARKET@GMAIL.COM	
E-mail addr	ess: (to be used for future annual report notification)	S 12
	Ä	
For further information concerning this	matter, please call:	SECRETARY
MICHEELE HOLMES	561 644-1966 F	0 -0 11
Name of Contact Person	Area Code & Daytime Telephone Num	ber N
Enclosed is a check for the following an	mount made payable to the Florida Department of State:	2: 52 2: 52
■ \$35 Filing Fee □\$43.75 Fil Certificate	-	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

LEMATIS STREET MARKET CORPORATION

(Name of Corporation as co	currently filed with the Florida Dept. of State)
24000046088	
(Document Nu	imber of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statute s Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
If amending name, enter the new name of the corporate	tion:
	The new
ame must be distinguishable and contain the word "corporate Inc.," or Co., " or the designation "Corp," "Inc.," or "Corporate Chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Corp.," Co". A professional corporation name must contain the word
3. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>	.)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office and registered agent and/or the new registered office and registered office and registered office and registered agent and/or the new registered office and registered office and registered agent.	
	lorida street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fo	d Agent:
Signature of	j Hew Regulered Agend, y changing
Check if applicable	00 (II) () mg
☐ The amendment(s) is/are being filed pursuant to s. 607.01	(20 (11) (e), F.S.

amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and Idress of each Officer and/or Director being added: ttach additional sheets, if necessary) ease 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 ecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. esident, 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, ike Jones, V as Remove, and Sally Smith, SV as an Add. ample: John Doe Change PT <u>v</u> Mike Jones ∠ Add <u>\$V</u> Sally Smith <u>Address</u> <u>Title</u> <u>Name</u> pe of Action heck One) 533 CLEMATIS STREET 2A VP **DENA PARZGNOT** __ Change WPB FL 33401 Add Remove Change Add Remove Change Add Remove Change Add Remove Change Add

Remove

Change

Add

Remove

<u>If amending or adding additional Arti</u> Attach <i>additional sheets, if necessary).</i>	(Be specific)		
			
			
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f an amendment provides for an excl	nange, reclassification, or cancellat	ion of issued shares.	SECRETARY'S
provisions for implementing the ame	ndment if not contained in the am	endment itself:	AS P
provisions for implementing the ame (if not applicable, indicate N/A)		· · · · · · · · · · · · · · · · · · ·	PH 2: Y OF SI SSEE.
•			ന്നു വ
			FE 2
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•	10/14/2024	
e date of each amendment(s) adoption:	, if other than the
e this document was signed.		
i	0/14/2024 OR EARLEST DATE POSSIBL	E AFTER 10/14/2024
ective date <u>if applicable</u> :		1 (6) 1 (1)
	(no more than 90 days after	· amendment file date)
	s block does not meet the applicable statut Department of State's records.	ory filing requirements, this date will not be listed as the
option of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of dis	rectors without shareholder action and shareholder
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of sufficient for approval.	f votes cast for the amendment(s)
The amendment(s) was/were must be separately provided	approved by the shareholders through voting for each voting group entitled to vote separate	groups. The following statement ately on the amendment(s):
"The number of votes of	ast for the amendment(s) was/were sufficien	ut for approval
by MICHELE HOLM	2 S	,,
<i></i>	(voting group)	
11/12/20 Detect	124	
/	24/2/	
Signature	The The	
	a director, president or other officer - if dire	
	cted, by an incorporator – if in the bands of	a receiver, trustee, or other caper?
арр	ointed fiduciary by that fiduciary)	- M C west
	MICHELE HOLMES	AAR L
	(Typed or printed name of pe	mon signing)
	(Typed or printed name of pe	rson signing)
	PRESIDENT	erson signing)
	(Title of person signing)	7 7 7
	(1