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COVER LETTER

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Division of Corporations

NAME OF CORPO	Gentle Grace, Corr DRATION:					
DOCUMENT NUM	1BER:					
The enclosed Article	es of Amendment and fee are su	bmitted for filing.				
Please return all corr	respondence concerning this ma	tter to the following:				
	Melissa Silva					
	Gentle Grace, Corp	Name of Contact Persor	1			
	424 E 46th ST	Firm/ Company	·····			
	Hiałeah FL, 33013	Address	<u></u>			
	Smelissa2285@gmail.com	City/ State and Zip Cod	с с			
	E-mail address: (to be u	sed for future annual report		L S S	202	
For further informati	ion concerning this matter, plea	se call:		ORE AUL	4 AU	-17
Melissa Silva		786 at (227-9188	TAR) Al IA	2024 AUG 22	nativat 1 menitari 1
Name	e of Contact Person	Area Co	de & Daytime Telephone Number		PD4	
Enclosed is a check	for the following amount made	payable to the Florida Depa	227-9188 	E, FL	PH 4: 52	C
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	, <u> </u>	2	
Ai Di P,e	ailing Address nendment Section (vision of Corporations O, Box 6327 Illahassee, FL 32314	Amend Divisio The C 2415 f	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 issee, FL 32303			

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)

Gentle Grace, Corp

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(Document Number of Corporation (if known)

Pursuant to the provisions of section 607,1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A	The n	enc
	on," "company," or "incorporated" or the abbreviation "Corp. o", A professional corporation name must contain the wo	»., "
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A	_
2. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A	_
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office ag N/A <u>Name of New Registered Agent</u>		oner Alic o
(Flor N/A	rida street address)	S DM
<u>New Registered Office Address</u> :	$\frac{1}{(Chy)} = \frac{1}{(Chy)} $	я С

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

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

Nignature of New Registered Agent, if changing

Check if applicable

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

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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 = ChiefExecutive 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.

Example: X Change

Example: <u>X</u> Change	<u>PT John</u>	Doe	
<u>X</u> Remove	<u>V</u> <u>Mike</u>	Jones	
<u>X</u> Add	<u>SV Sally</u>	Smith	
<u>Type of Action</u> (Check One)	Title	<u>Name</u>	<u>Addres</u> s
	D	Mefissa Silva	424 E 46th ST, Hialeah FL 33043
i)Change			
Add Remove			
			<u></u>
2) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
3) Remove			
Add			SEC 2124
Remove			SECRETALIAHA
4) Change			DB 22 PH L
Add			
Remove			
5/ Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
6) Change			
Add			
Remove			

•	•

E. <u>If amending or adding additional Articles, enter change(s) here</u>: (Attach *additional sheets, if necessary).* (Be specific)

(Attach additional sheets, if necessary). (Be specific N/A

	<u> </u>
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	5 ~ 5
provisions for implementing the amendment if not contained in the amendment itself:	m 53
(if not applicable, indicate N/A)	
N/A	
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١. ÷, The date of each amendment(s) adoption: ______, if other than the

date this document was signed. 08/15/2024

Effective date if applicable: _

(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

- The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- □ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for	approval
N/A	
E.,	••

N .			
	(voting group)		
08/15/202	4		
Dated			
Signature	RA.		
select	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary) Melissa Silva		
	(Typed or printed name of person signing) Director	SECRI TAL	2024 AUG 22
	(Title of person signing)	ETARY OF STAT LAHASSEE, FL	JIG 22 PH 4: 52

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