Note: Please print this page and use It as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000371000 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : SORSHER & ASSOCIATES, LLC.

Account Number : I20170000056 Phone

: (954)842-2931

Fax Number

: (954)842-2936

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 OVERSIZEONLY, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

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Corporate Filing Menu

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORP	ORATION: OVERSIZEONI	YINC				
DOCUMENT NUMBER: P24000057539						
The enclosed Articl	les of Amendment and fee are	submitted for filing.				
	rrespondence concerning this n	-				
	ARIFOV, OLEG					
		Yanu of Comp.				
	OVERSIZEONLY INC	Name of Contact Person	On .			
		Firm/ Company				
	900 N FEDERAL HWY ST	E 306				
	~	Address				
	HALLANDALE BEACH, I	•				
		City/ State and Zip Coo	ie			
	john@oversizeonly.com					
		sed for future annual repor	notification)			
For further informati	on concerning this matter, plea	se call:				
ARIFOV, OLEG		at (407	, 960-9026	TAC TAC	2024 NOV - 7	
Name	of Contact Person		de & Daytime Telephone Num	ber 5	Q	77
Enclosed is a check f	for the following amount made			HAS		
S35 Filing Fee	□\$43.75 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)	OF STATE SEE, FL	AM 9: 55	
Am	iling Address lendment Section ission of Corporations	Amend	Address ment Section n of Corporations			

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810 Tallahassec, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corpo	Oration as currently filed	with the Florida Dept. of Stat		
P24000057539	STATION AS CUITERIES INFO	with the Florida Dept. of Stat	<u>e</u>)	
(De	ocument Number of Corp	oration (if known)		
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this Florid	a Profit Corporation adopts the	following amends	nent(s) to
A. If amending name, enter the new name of the	he corporation:			
			The ne	
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," ", "chartered," "professional association," or the a		ny," or "incorporated" or the abo ssional corporation name mus	the nebreviation "Corp. Contain the wo	:w ," rd
B. <u>Enter new principal office address, if applic</u> (Principal office address <u>MUST BE A STREET</u>)	able: 4DDRESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	ROY			
	<u></u>		- tô	21
				1024 NOV - 7
	<u> </u>			PO VO
). If amending the registered agent and/or regi	stered office address in]	lorids, enter the name of the	五 五 五 五	-
new registered agent and/or the new register	ed office address:		SS	2
Name of New Registered Agent				9.
		_	프롤	رن بر
	(Florida street addre	·ss)		51
New Registered Office Address:		, Florida		
	(Ciŋi)	_	(Zip Code)	
ew Registered Agent's Signature, if changing R	Registered Agent:			
hereby accept the appointment as registered agent	t. I am familiar with and	accept the obligations of the pos	ition.	
Sig	gnature of New Registered	Agent, if changing		
heck 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 = Trusiee; 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. Example:

<u>∧</u> Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>_X</u> Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	_Title	Name	<u>Addres</u> s
1) Change	<u>P</u>	CURMEI, ION	900 N FEDERAL HWY STE 306
Add		· · · · · · · · · · · · · · · · · · ·	HALLANDALE BCH, FL 33009
X Remove			
2) Change	P	ARIFOV, TEMUR	900 N FEDERAL HWY STE 306
Add			HALLANDALE BCH, FL/33009
X Remove 3) Change			ALU
Add			
Remove			SOF 3
4) Change			- FIN 4
Add			77.
Remove			
5) Change			
Add		_	
Remove			
6) Change			
Add			
Remove			

date this document was signed.	adoption;	, if other than	th
Effective date if applicable:			
	(no more than 90 days after amendment file date)		
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date we Department of State's records.	vill not be listed as	the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without shareholder action at	nd shareholder	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.		
The amendment(s) was/were a must be separately provided f	approved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):		
"The number of votes ca	st for the amendment(s) was/were sufficient for approval		
	(voting group)	(0. 53	
11/07/20) Dated		2024 NOV - 7 Signifian Tallaha	Ä
Signature	Olag Arifov	'A "\	<u>-</u>
26i6Ci	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)		
	ARIFOV, OLEG	55 	
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		