

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : SORSHER & ASSOCIATES, LLC.

Account Number : I2017000056 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.

COR AMND/RESTATE/CORRECT OR O/D RESIGN OVERSIZEONLY, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: OVERSIZEONL	Y, INC.	
	IBER: P24000057539		
	s of Amendment and fee are s	ubmitted for filing.	_
Please return all corre	espondence concerning this m	atter to the following:	
	ARIFOV, OLEG		
		Name of Contact Perso	on
	OVERSIZEONLY, INC.		
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
	900 N FEDERAL HWY ST	E 306	
		Address	
	HALLANDALE BEACH, F	L 33009	
		City/ State and Zip Coo	de
	john@oversizeonly.com		
	E-mail address: (to be u.	sed for future annual repor	t notification)
For further informatio	n concerning this matter, plea	se call:	
ARIFOV, OLEG		at (407 ·	960-9026 ode & Daytime Telephone Number
Name	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Dep	eartment of State:
S35 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 P.O.	ling Address Indiment Section Ission of Corporations Box 6327 Ishassee, FL 32314	Amend Division The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment Articles of Incorporation of

orporation as currently filed with the Florida Dept. of State)	
(Document Number of Corporation (if known)	
6, Florida Statutes, this Florida Profit Corporation adopts the following amend	ment(s)
of the corporation:	
Th	
word "corporation," "company," or "incorporated" or the abbreviation "Corp " "Inc." or "Co". A professional corporation name must contain the ver-	• • • • • • • • • • • • • • • • • • • •
plicable: ET ADDRESS)	-
	-
t: ICE BOX)	-
registered office address in Florida, enter the name of the istered office address:	
(Florida street address)	
, Florida	

Check 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:

 $P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO <math>\simeq$ Chief Executive Officer; CFO \simeq 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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	CURMEI, CONSTANTIN	900 N FEDERAL HWY STE 306
X Add			HALLANDALE BCH, FL 33009
Remove			
2) Change	<u>s</u>	CURMEI, ION	900 N FEDERAL HWY STE 306
X Add			HALLANDALE BCH, FL 33009
Remove 3) Change	S	ARIFOV, TEMUR	900 N FEDERAL HWY STE 306
X Add			HALLANDALE BCH, FL 33009
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
O) Change			
Add			
Remove			

	i <mark>cles, enter change(s) here</mark> : (Be specific)
· · · · · · · · · · · · · · · · · · ·	
·	
an amendment provides for an excha rovisions for implementing the amen (if not applicable, indicate N/A)	nge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
rovisions for implementing the ameni	nge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
rovisions for implementing the ameni	nge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
rovisions for implementing the ameni	nge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
rovisions for implementing the ameni	nge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
rovisions for implementing the ameni	nge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:

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The date of each amendment(s) adoption: 12/20/2024 date this document was signed.	, if other than the
· · · · · · · · · · · · · · · · · · ·	
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 vidocument's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action a action was not required.	nd shareholder
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	
by	
(voting group)	
12/20/2024 Dated	
Signature Olsq Arifon	
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
ARIFOV, OLEG	
(Typed or printed name of person signing)	<u> </u>
President	
(Title of person signing)	

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