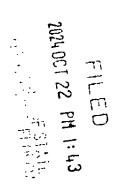
P24000062417

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1
NO. HORNE
J. HORNE NOV - 8 2024

Office Use Only



700438112837



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Lucky Four Leaf In	nc.	
DOCUMENT NUMI	BER: P24000062417		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Leslie Moreau		
		Name of Contact Persor	1
	Lucky Four Leaf Inc.		
		Firm/ Company	
	13014 N. Dale Mabry Highwa		
		Address	
	Tampa, FL 33618		
		City/ State and Zip Code	e
		,	
	lesliemoreau@yahoo.com		
	r,-mail address; (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Leslie Moreau		at (956-3267 de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
□ \$35 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations The Centre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED 2024 OCT 22 PM 1: 43

	2024 OCT 22 PH 1:
(Name of Corporation as currently	v filed with the Florida Dept. of State)
(Document Number of	**Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>I</i> its Articles of Incorporation;	Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered." "professional association," or the abbreviation "P.A."	
B. <u>Enter new principal office address, if applicable:</u> (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 addr new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	eet address)
New Registered Office Address:	Florida
•	(Cuy) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar w	: with and accept the obligations of the position.
Signature of New Re	egistered Agent, if changing

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 = 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:

X Change	<u>PT</u>	John Doc			
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	TS	Curtis O. Moreau		13014 N. Dale Mabry Highway #200	
X Add				Tampa, FL 33618	
Remove					
2) Change		 			
Add					
Remove 3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change		·			
Add					
Remove					
6) Change		-			
Add					
Remove					

	s, if necessary).	cles, enter chang (Be specific)				
	- · · ·					
	-			· 	•	
						
<u> </u>						
	. <u> </u>					
 						
						_
						
					.	
						
						
<u> </u>						
in amendment provi	ides for an exch	ange, reclassific	ation, or cancella	tion of issued sha	res,	
ovisions for implem	enting the amer	ange, reclassific	ation, or cancella	tion of issued sha endment itself:	rės.	
in amendment provi ovisions for implem (if not applicable, i	enting the amer	ange, reclassific idment if not co	ation, or cancella ntained in the am	tion of issued sha endment itself:	res,	
ovisions for implem	enting the amer	ange, reclassific adment if not co	ation, or cancella ntained in the am	tion of issued sha endment itself:	res,	
ovisions for implem	enting the amer	ange, reclassific	ation, or cancella ntained in the am	tion of issued sha endment itself:	res.	
ovisions for implem	enting the amer	ange, reclassific adment if not co	ation, or cancella ntained in the an	tion of issued sha endment itself:	<u>res.</u>	
ovisions for implem	enting the amer	ange, reclassific adment if not co	ation, or cancella ntained in the an	tion of issued sha endment itself:	res,	
ovisions for implem	enting the amer	ange, reclassific adment if not co	ation, or cancella ntained in the an	tion of issued sha endment itself:	res,	
ovisions for implem	enting the amer	ange, reclassific adment if not co	ation, or cancella ntained in the am	tion of issued sha endment itself:	res,	
ovisions for implem	enting the amer	ange, reclassific adment if not co	ation, or cancella ntained in the an	tion of issued sha endment itself:	res,	
ovisions for implem	enting the amer	ange, reclassific adment if not co	ation, or cancella ntained in the an	tion of issued sha endment itself:	res,	
ovisions for implem	enting the amer	ange, reclassific ndment if not co	ation, or cancella ntained in the an	tion of issued sha endment itself:	res,	
ovisions for implem	enting the amer	ange, reclassific	ation, or cancella ntained in the an	tion of issued sha endment itself:	res,	
ovisions for implem	enting the amer	ange, reclassific	ation, or cancella ntained in the an	tion of issued sha endment itself:	res,	
an amendment provi rovisions for implem (if not applicable, i	enting the amer	ange, reclassific	ation, or cancella	tion of issued sha endment itself:	res,	
rovisions for implem	enting the amer	ange, reclassific	ation, or cancella	tion of issued sha endment itself:	res,	
rovisions for implem	enting the amer	ange, reclassific	ation, or cancella	tion of issued sha endment itself:	res,	

.

	adoption:, if other than the		
date this document was signed.			
Effective date if applicable:			
	(no more than 90 days after amendment file date)		
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.		
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
■ The amendment(s) was/were acaction was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder		
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.		
☐ The amendment(s) was/were a must be separately provided fi	oproved 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		
by	,"		
	(voting group)		
October 1 Dated	8, 2024		
Signature	Les le Moreau		
select	director, president or other officer – if directors or officers have not been led, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)		
	Leslie Moreau		
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		