P2500034566

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: MOORE'S UMPIR	RE INC.		
	1BER: P25000034566			
	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Patrick K. Moore			
		Name of Contact Person	1	
	MOORE'S UMPIRE INC.			
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·	
	3540 Whitehall Dr Apt 102	· · · · · · · · · · · · · · · · · · ·		
	· · · · · · · · · · · · · · · · · · ·	Address		
	West Palm Beach , FL. 3340			
		City/ State and Zip Code	e	
	MOOREPK6@HOTMAIL.C	`OM		
	-	sed for future annual report	notification)	
	1. man namess. (to be at	sed for fatare annual report	normalion,	
For further informati	on concerning this matter, pleas	se call:		
Patrick K. Moore		561	301-5728 de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐S43.75 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		Amend Divisio	Address ment Section in of Corporations	
P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Moore's compire Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)
1250000 34566
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent Rose Brock
3540 Whitehall Dr. Apt 102.
(Florida street address)
New Registered Office Address: West Palm Beach . Florida . Florida
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. Signature of New Registered Agent. if changing Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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	\underline{V}	Mike Jones	
<u>X</u> Add		Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PTSD	Patrick K. Moore	3540 Whitehall Dr. Apt 102
x Add			West Palm Beach . FL 33401
Remove			
2) Change	PTSD	Rose Brock	3540 Whitehall Dr. Apt 102
Add			West Palm Beach . FL 33401
X Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
(Times and one is, y needs on y).	(2. Sp. og.)

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If an amoudment provides for an arch	ange, reclassification, or cancellation of issued shares,
navigions for implementing the amo	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument if not contained in the amendment usen.
(i) not applicable, indicate to A)	
·	

! The data of each amondment(s) ad	06/09/2025		if other	r than the
The date of each amendment(s) addate this document was signed.	puon:		, if othe	t man m
Effective date <u>if applicable</u> :	(no more than 90 days aft	ier amendment file date)		_
Note: If the date inserted in this blocument's effective date on the Dep	ck does not meet the applicable state artment of State's records.	utory filing requirements, this	date will not be lis	ted as the
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopaction was not required.	ted by the incorporators, or board of o	directors without shareholder a	action and sharehold	er
☐ The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number icient for approval.	of votes cast for the amendme	ent(s)	
	oved by the shareholders through voti ach voting group entitled to vote sepa		ement	
"The number of votes cast f	the amendment(s) was/were sufficients	ent for approval		
s, <u>g</u>	(voting group)			
selected.	cetor, president or other officer – if di by an incorporator – if in the hands of I fiduciary by that fiduciary) Patrick K. Ma (Typed or printed name of p	f a receiver, trustee, or other c		-
	PISD			
	(Title of person signing)		SEC. ARY OF STATE TALLAHASSEE, FL	