## P93 (100003509

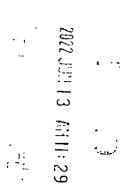
| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ad                     | ldress)            | <u>.</u>    |
| (Ad                     | ldress)            |             |
| (Cit                    | ty/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | siness Entity Nar  | me)         |
| (Do                     | cument Number)     |             |
| Certified Copies        | Certificates       | s of Status |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |

Office Use Only



100389255161

05/18/22--01820- 008 \*\*42.70



CT 8/31/2022

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPOR          | RATION: A Clip Above Inc                                                |                                                                  |                                                                                      |
|-------------------------|-------------------------------------------------------------------------|------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| DOCUMENT NUME           | BER:                                                                    |                                                                  |                                                                                      |
|                         | of Amendment and fee are su                                             | bmitted for filing.                                              |                                                                                      |
| Please return all corre | spondence concerning this ma                                            | tter to the following:                                           |                                                                                      |
|                         | Kent A Greer                                                            |                                                                  |                                                                                      |
|                         |                                                                         | Name of Contact Person                                           |                                                                                      |
|                         | A Clip Above Inc                                                        |                                                                  |                                                                                      |
|                         |                                                                         | Firm/ Company                                                    |                                                                                      |
|                         | 1044 North Stoney Point                                                 |                                                                  |                                                                                      |
|                         |                                                                         | Address                                                          |                                                                                      |
|                         | Crystal River Florida 34429                                             |                                                                  |                                                                                      |
|                         |                                                                         | City/ State and Zip Code                                         | ;                                                                                    |
|                         | cageyy1954@gmail.com                                                    |                                                                  |                                                                                      |
|                         |                                                                         | sed for future annual report                                     | notification)                                                                        |
|                         |                                                                         |                                                                  |                                                                                      |
| For further informatio  | n concerning this matter, pleas                                         | se call:                                                         |                                                                                      |
| Kent A Greer            |                                                                         | at (                                                             | 1                                                                                    |
| Name                    | of Contact Person                                                       | Area Coo                                                         | de & Daytime Telephone Number                                                        |
| Enclosed is a check for | or the following amount made                                            | payable to the Florida Depa                                      | artment 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) |
| Am<br>Div               | iling Address<br>endment Section<br>ision of Corporations<br>. Box 6327 | Amend<br>Divisio                                                 | Address Iment Section In of Corporations In of Tallahassee                           |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

|                                                                                                                                                                                                          | 2022 July 3 fittl:                                                                                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|
| (Name of Corporation as currently                                                                                                                                                                        | y filed with the Florida Dept. of State)                                                                          |
| P93000003509                                                                                                                                                                                             | ·                                                                                                                 |
| (Document Number of                                                                                                                                                                                      | f Corporation (if known)                                                                                          |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:                                                                                                        | Florida Profit Corporation adopts the following amendment(s) to                                                   |
| A. If amending name, enter the new name of the corporation:                                                                                                                                              |                                                                                                                   |
| ankectown Investments Inc                                                                                                                                                                                | The new                                                                                                           |
| ame must be distinguishable and contain the word "corporation," "c<br>Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A<br>chartered," "professional association," or the abbreviation "P.A." | company," or "incorporated" or the abbreviation "Corp.,"<br>A professional corporation name must contain the word |
| 3. Enter new principal office address, if applicable:                                                                                                                                                    | N/A                                                                                                               |
| Principal office address <u>MUST BE A STREET ADDRESS</u> )                                                                                                                                               |                                                                                                                   |
|                                                                                                                                                                                                          |                                                                                                                   |
|                                                                                                                                                                                                          |                                                                                                                   |
| 2. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)                                                                                                                  | N/A                                                                                                               |
|                                                                                                                                                                                                          |                                                                                                                   |
|                                                                                                                                                                                                          |                                                                                                                   |
| <ol> <li>If amending the registered agent and/or registered office addr<br/>new registered agent and/or the new registered office address:</li> </ol>                                                    |                                                                                                                   |
| Name of New Registered Agent N/A                                                                                                                                                                         |                                                                                                                   |
| Name of New Registered Agent                                                                                                                                                                             |                                                                                                                   |
|                                                                                                                                                                                                          | pat addrayet                                                                                                      |
| Ælavida etra                                                                                                                                                                                             | ect murcosy                                                                                                       |
| (Florida stre                                                                                                                                                                                            |                                                                                                                   |
| New Registered Office Address:                                                                                                                                                                           | . Florida (Zip Code)                                                                                              |

Check if applicable

 $\Box$  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 Doe    |         |
|----------------------------|-----------------|-------------|---------|
| X Remove                   | $\underline{V}$ | Mike Jones  |         |
| X Add                      | <u>sv</u>       | Sally Smith |         |
| Type of Action (Check One) | <u>Title</u>    | <u>Name</u> | Address |
| 1) Change                  |                 | <u> </u>    |         |
| Add                        |                 |             |         |
| Remove                     |                 |             |         |
| 2) Change                  |                 |             |         |
| Add                        |                 |             |         |
| Remove 3 ) Change          |                 |             |         |
| Add                        |                 |             |         |
| Remove                     |                 |             |         |
| 4) Change                  |                 |             |         |
| Add                        |                 |             |         |
| Remove                     |                 |             |         |
| 5) Change                  |                 |             |         |
| Add                        |                 |             |         |
| Remove                     |                 |             |         |
| 6) Change                  |                 |             |         |
| Add                        |                 |             |         |
| Remove                     |                 |             |         |

| . If amending or adding additional Arti (Attach additional sheets, if necessary). | (Be specific)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|-----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| VA                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   | that the state of |
| . If an amendment provides for an excl                                            | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| (if not applicable, indicate N/A)                                                 | indirect in not contained in the animonous system                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| VA.                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |

|                                                                         | 06/08/2022                                                                                                                                                                                    |                             |
|-------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| The date of each amendment(s) a date this document was signed.          | doption:                                                                                                                                                                                      | , if other than the         |
| Effective date if applicable:                                           |                                                                                                                                                                                               |                             |
|                                                                         | (no more than 90 days after amendment file date)                                                                                                                                              |                             |
| Note: If the date inserted in this bedocument's effective date on the D | block does not meet the applicable statutory filing requirements, this date epartment of State's records.                                                                                     | e will not be listed as the |
| Adoption of Amendment(s)                                                | ( <u>CHECK ONE</u> )                                                                                                                                                                          |                             |
| The amendment(s) was/were ad action was not required.                   | opted by the incorporators, or board of directors without shareholder actio                                                                                                                   | n and shareholder           |
| ☐ The amendment(s) was/were ad<br>by the shareholders was/were s        | opted by the shareholders. The number of votes cast for the amendment(sufficient for approval.                                                                                                | )                           |
| ☐ The amendment(s) was/were ap must be separately provided for          | proved by the sharcholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):                                                  | nt                          |
| "The number of votes cast                                               | for the amendment(s) was/were sufficient for approval                                                                                                                                         |                             |
| by N/A                                                                  | "                                                                                                                                                                                             |                             |
| • =                                                                     | (voting group)                                                                                                                                                                                |                             |
| 06/08/2022<br>Dated                                                     | <u> </u>                                                                                                                                                                                      |                             |
| Signature                                                               | Wit ofen                                                                                                                                                                                      |                             |
| (By a c                                                                 | lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court and fiduciary by that fiduciary) |                             |
|                                                                         | Kent A Greer                                                                                                                                                                                  |                             |
|                                                                         | (Typed or printed name of person signing)                                                                                                                                                     |                             |
|                                                                         | President                                                                                                                                                                                     |                             |
|                                                                         | (Title of person signing)                                                                                                                                                                     |                             |