P93000803

(Re	equestor's Name)	
(Ac	ddress)	-
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: J & K Novelty, Inc.	;.		
DOCUMENT NUM	IBER: P93000086273			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Ellen Michelle Farha			
	Name of Contact Person			
	J & K Novelty, Inc.			
	Firm/ Company			
	6581 43rd St N Suite 1510	. ,		
		Address	· · · · · · · · · · · · · · · · · · ·	
	Pinellas Park, FL 33781			
		City/ State and Zip Cod	e	
mic	hellejk9@gmail.com			
		sed for future annual report	natification	
For further informati Ellen Michelle Farha	on concerning this matter, pleas	se call:	527-1816	
Name	e of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check t	for the following amount made		-	
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327			Address	
			Iment Section on of Corporations	
			n Building	
Ta	llahassee, FL 32314		Executive Center Circle	
		Tallah:	assee, FL 32301	

Articles of Amendment to Articles of Incorporation of

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J & K Novelty, Inc.

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(Name of Corporation as cur	rently filed with the Florida Dept. of State)
P93000086273	
(Document Numb	ber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation	n:
	The new pration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the tion "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	4
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade	
	·
Name of New Registered Agent	
(Elavi	ida street address)
· ·	au siree auuressy
New Registered Office Address:	(City) , Florida (Zip Code)
	(cuy) (zip code)
New Registered Agent's Signature, if changing Registered A	
I hereby accept the appointment as registered agent. I am fami	iliar with and accept the obligations of the position.
Signature of N	New Registered Agent, if changing

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 _C	ange	<u>PT</u>	John Doe	
<u>X</u> Re	emove	<u>v</u>	Mike Jones	
<u>X</u> A	dd	<u>sv</u>	Sally Smith	
	of Action k One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)	_ Change	VTD	Renaud, Richard M	6581 43rd St N #1510
	Add			Pinellas Park, FL 33781
<u>x</u>	Remove			
2)	_ Change	PDS	Renaud, Judy	6581 43rd St N #1510
	Add			Pinellas Park, Fl 33781
X	Remove			
3) <u>X</u>	Change	PTTD	Farha, Ellen M	6581 43rd St N #1510
	Add			Pinellas Park, FL 33781
_	Remove			
4)	Change	VP	Renaud, Christopher	6581- 43rd St N
	Add			Suite 1510
x	Remove			Pinellas Park, FL 33781
5)	Change	S	Cheryll O'Quinn	6581 43rd St N #1510
X	Add			Pinellas Park, FL 33781
	Remove			
6)	Change	_	_	
	Add			
	Remove			

E. If amending or adding additional A (Attach additional sheets, if necessary	Articles, enter change(s) here: v). (Be specific)
N/A	y. (De apecyte)
	
	<u> </u>
•	
	
F. If an amendment provides for an exprovisions for implementing the artific (if not applicable, indicate N/A)	xchange, reclassification, or cancellation of issued shares, mendment if not contained in the amendment itself:)
·	
-	·

The date of each amendment(s) as date this document was signed.	loption:	, 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 De	lock does not meet the applicable statutory filing requirements, this date with partment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
9/25/2017		
DatedSignature	Cen Foli	
selecte	irector, 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 led fiduciary by that fiduciary)	_
	Ellen M Farha	
	(Typed or printed name of person signing)	
	PTD	
	(Title of person signing)	<u> </u>