P940000 4599

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nar	ne)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Stu's Cut, Inc.		
DOCUMENT NUM	BER: P94000004599		
The enclosed Articles	of Amendment and fee are s	submitted for filing.	
Please return all corre	spondence concerning this m	natter to the following:	
	Sandra Bailey		
		Name of Contact Perso	ND
	Stu's Cut, Inc.	or contact i cisc	21
		Firm/ Company	
	19304 Eastbrook Drive	• •	
		Address	
	Odessa, Florida 33556		
		City/ State and Zip Cod	e
sbaile	e@verizon.net		
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
Sandra Bailey		, 2 39	. 293-0361
Name o	of Contact Person	at (de & Daytime Telephone Number
enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Division Clifton	Address ment Section n of Corporations Building kecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	e of Corporation as currently filed with the Florida Dept. of State) 1.5
P94000004599	,
	(Document Number of Corporation (if known)
Pursuant to the provisions of section 60 its Articles of Incorporation:	97.1006. Florida Statutes, this Florida Profit Corporation adopts the following ame
A. If amending name, enter the new	name of the corporation:
word "chartered," "professional associ	
3. Enter new principal office address Principal office address <u>MUST BE A</u> .	s, if applicable: STREET ADDRESS
C. Enter new mailing address, if app (Mailing address MAY BE A POST	olicable: **OFFICE BOX*)
	-
). If amending the revistered agent w	nd/or registered - 60.
o. If amending the registered agent an new registered agent and/or the ne	nd/or registered office address in Florida, enter the name of the
as registered agent and/or the ne	Spades Balles
b. If amending the registered agent at new registered agent and/or the new Name of New Registered Agent	Spades Balles
as registered agent and/or the ne	Sandra Bailey
Name of New Registered Agent	Sandra Bailey 19304 Eastbrook Drive (Florida street address) Odessa 33556
as registered agent and/or the ne	Sandra Bailey 19304 Eastbrook Drive (Florida street address)
Name of New Registered Agent	Sandra Bailey 19304 Eastbrook Drive (Florida street address) Odessa , Florida 33556
Name of New Registered Agent New Registered Office Address: ew Registered Agent's Signature, if c	Sandra Bailey 19304 Eastbrook Drive (Florida street address) Odessa , Florida (City) (Zip Code)
Name of New Registered Agent New Registered Office Address: ew Registered Agent's Signature, if chereby accept the appointment as registered.	Sandra Bailey 19304 Eastbrook Drive (Florida street address) Odessa (City) (Zip Code)

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title 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; C. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PVST	Stuart F Bailey	19304 Eastbrook Drive
Add			Odessa, Florida
X Remove			33556
2) X Change	PVST	Sandra Bailey	19304 Eastbrook Drive
Add			Odessa, Florida
Remove			33556
3) Change	-		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>addition</i>	al sheets, if necessary).	(Be specific)	<u>{</u>			
						
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n amendmen	provides for an arch	1 15				
O 1 131 OH3 TOT 1	provides for an exchange the amend	ament if not cont	<u>ion, or cancellati</u> sined in the ame	ion of issued sha	ıres,	
(у ногарра	cuote, inaicate (V/A)		amed in the ame	mument itseir.		
ary withdraw	al					
						
						
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The date of each amendment(s) adoption:	. if o
date this document was signed.	, 0
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 9/73/2019 Signaturé andre Daine	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Sandra Bailey	
(Typed or printed name of person signing)	
PVST	
(Title of person signing)	