P960000075045

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer. Date Signature			
Signature 31.750			

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09/04/24--01/4--030 ***35.66



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: The Cobra Shop Ir	nc.				
DOCUMENT NUME	P96000075045					
The enclosed Articles	of Amendment and fee are su	abmitted for filing.				
Please return all corres	pondence concerning this ma	itter to the following:				
	Matthew May					
		Name of Contact Person	1			
	The Cobra Shop Inc.					
		Firm/ Company				
	8921 N. Fork Dr.					
	·	Address				
	Fort Myers, Fl. 33903					
	City/ State and Zip Code					
	C .1 .51	11 (a) a. 1	•			
	E-mail address: (to be us	sed for future annual report	notification)			
		·				
For further information	n concerning this matter, plea	se call:				
Matthew May		at (²³⁹	995-8314			
Name o	of Contact Person	Area Co	995-8314 de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:			
S35 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 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment **Articles of Incorporation** of

The Cobra Snop Inc				
(Name of	Corporation as currently	y filed with the Florida De	ept. of State	()
P96000075045		0		
	(Document Number of	f Corporation (if known))	f.: j: g	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this A	Florida Profit Corporation	adopts the	following amendment(s)
·				
A. If amending name, enter the new name	me of the corporation:			
				The new
name must he distinguishable and contain to "Inc.," or Co.," or the designation "Co "chartered," "professional association," o	orp," "Inc," or "Co". A	company," or "incorporated professional corporation	d" or the abi name musi	previation "Corp.," contain the word
	P k .)		٠.	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		 		n)
				
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O			: 	
 If amending the registered agent and new registered agent and/or the new 	<u>/or registered office addr</u> registered office address:	ess in Florida, enter the n	ame of the	
	Matthew May			
:	20271 Pearce St.			
-	(Florida stre	eet address)		
New Registered Office Address:	N. Fort Myers	· · · · · · · · · · · · · · · · · · ·	, Florida_	3917
	((City)		(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (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)

Example:

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.

X 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Pres	Tim R. Douglas	8109 Boonesboro Rd.
Add			Fort Myers
x Remove			Fl. 33917
2) Change	Sec.	Rebecca I. Douglas	5498 Governors Dr.
Add			Fort Myers
X Remove 3) Change	Pres	Matthew May	F1. 33907
x Add			20271 Pearce St.
Remove			N. Fort Myers, Fl. 33917
4) Change			
Add			
Remove			
5) Change			
Add			<u> </u>
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necess	al Articles, enter change(s sary). (Be specific)	<u>y nere</u> .	
,			
			
			
	·		
		- 	
			
			
	-		
			
		 	
	·		
D 16			
F. If an amendment provides for an provisions for implementing the	1 exchange, reclassificatio	n, or cancellation of issu	ed shares,
(if not applicable, indicate N	/A)	med in the amendment	<u> </u>
			_ _
			
			- -, -, -, -, -, -, -, -, -, -, -, -, -,
			
			

 The date of each amendment(s) adoption: date this document was signed.	tember 1, 2024	, if other than the
Effective date if applicable: Septer	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of S	t meet the applicable statutory filing requirements, this date with the control of the control o	ill not be listed as the
Adoption of Amendment(s) (CHE	CCK ONE)	
The amendment(s) was/were adopted by the in action was not required.	acorporators, or board of directors without shareholder action an	d shareholder
☐ The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for ap	hareholders. The number of votes cast for the amendment(s) oproval.	
☐ The amendment(s) was/were approved by the smust be separately provided for each voting g	shareholders through voting groups. The following statement eroup entitled to vote separately on the amendment(s):	
"The number of votes cast for the amend	Iment(s) was/were sufficient for approval	
by(voting	g group)	
Signature (By a director, preside selected, by an incorpappointed fiduciary by	ent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)	
Tim R. Dougl	las yped or printed name of person signing)	
Pres	itle of person signing)	



October 25, 2024

MATTHEW MAY 8921 N. FORK DR. FORT MYERS, FL 33903

SUBJECT: THE COBRA SHOP, INC.

Ref. Number: P96000075045

We have received your document for THE COBRA SHOP, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 724A00023568

Anissa Butler Regulatory Specialist II

JEC = 1V = 1 NOV 23 2024 |



September 12, 2024

MATTEW MAY 8921 N. FORK DR. FORT MYERS, FL 33903

SUBJECT: THE COBRA SHOP, INC.

Ref. Number: P96000075045



Letter Number: 824A00020502

We have received your document for THE COBRA SHOP, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

If the corporation is a **PROFIT** corporation it must be signed 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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

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