N06000000142

(Re	equestor's Name)	
(Ac	ddress)	
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C. BRUMBLEY DEC - 9 2021

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: COUNTR	YOAKS H.	O. A., INC.	
DOCUMENT NUMBER: NOGOO		,	
The enclosed Articles of Amendment and fee are sub			
Please return all correspondence concerning this matt	er to the following:		
LAWRENCE E . BR	01/14		
Fruit Con	(Name of Contact Person	1)	
	(Firm/ Company)		
471 CARLEY LY.			
	(Address)		
(OCOA, FL 3292	26		
LEBROWN JR CE	MAIL . COM	1	
	d for future annual report	notification)	
For further information concerning this matter, please	,	^	
LAURENCE E. BRCUJ	<u>at (</u>	941)650-8815	
(Name of Contact Person	n) (Ai	ea Code) (Daytime Telephone Number	.)
Enclosed is a check for the following amount made p	ayable to the Florida Dep	artment of State:	
\$35 Filing Fee S43.75 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		Address ment Section	
ATHERMITER SECTION	AHRURG	men ottuni	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to Articles of Incorporation

of

COUNTRY DAKS H.	O. A. /NC.	
(Name of Corporation as currently filed with the	Florida Dept. of State)	
N06000000142		
	ent Number of Corporation (if kno	wn)
Pursuant to the provisions of section 617.1006, Flori amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the		Profit Corporation adopts the following
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.		
B. Enter new principal office address, if applicab (Principal office address MUST BE A STREET AL		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	(<u>OX</u>)	
	COCOA, FL	4 MBERS 1 N UNIT# - 32926
D. If amending the registered agent and/or regist new registered agent and/or the new registered		
<u>Name of New Registered Agent</u> :	471 CARLEY L	ida street address)
New Registered Office Address:	4 (70921
-	(City)	. Florida 32926 (Zip Code)
New Registered Agent's Signature, if changing Relatively accept the appointment as registered agent.		e obligations of the position.
_	Signature of New Register	ed 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 Change X Remove X Add	PT John 1 V Mike SV Sally		
Type of Action (Check One)	Title	Name	Address
1) 愛 Change _ X Add	P	LAWRENCE EBROW	N 471 CARLEY LN
Remove 2)	5	EUGENE MESAFFRE	COCCA, FL 32921 Y 432 CARLEY LA
Remove 3) Change Add Remove			COCO A, FL 32920
4) Change Add	P'	SUZANNE H. MCARDLE	SUZANNÉ H. MªARDLE 401 CARLEYLN
Fremove Change Add	_5_	MICHELE SMITH	COCOA, FL 32926 472 CARLEY LN COCOA, FL 32926
✓ Remove6) Change Add			
E. If amending or additional sheet		rticles, enter change(s) here: (Be specific)	

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~ / / ~		
The date of each amendment(s) adoption: QCTOB date this document was signed.	ER 12,2021	, if other than th
Effective date if applicable: (no more than 9	00 days after amendment file date)	
ino more mun	with a special amendment for auter	
Note: If the date inserted in this block does not meet the a	applicable statutory filing requiren	nents, this date will not be listed as the
document's effective date on the Department of State's red	corus.	

The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated NOVEMBER 12, 2021
Signature Signature
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
LAWRENCE E BROWN
(Typed or printed name of person signing)
PRISIDENT (Title of person signing)

. . . .