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COVER LETTER

TO: Amendment Section Division of Corporation						
NAME OF CORPOR	Astyle Hor BER: P140000572					
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all corres	spondence concerning this matte	er to the following:				
	Antonio Silva					
		Name of Contact Perso	on			
4	Astyle Homes I	Firm/ Company				
•	3381 SW Hill St	Address				
	Port St Lucie Fl			•		
	•	City/ State and Zip Coo	le			
	E-mail address: (to be use	d for future annual repor	1 notification)			
		·				
For further information	n concerning this matter, please	call:				
Antonio Sil		_{at (} 772	370-5465 ode & Daytime Telephone Number	·		
	of Contact Person	Area C	ode & Daytime Telephone Number			
Enclosed is a check fo	or the following amount made pa	ayable to the Florida Dep	partment of State:			
■ \$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)			
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amer Divis Clifto 2661	t Address idment Section ion of Corporations n Building Executive Center Circle nassee, FL 32301			
↑ Enter new mailing	address, if applicable:					
(Mailing address M.	AY BE A POST OFFICE BOX	0				
		-				
D. <u>If amending the reg</u> new registered ager	istered agent and/or registere nt and/or the new registered o	d office address in Flor	ida, enter the name of the			
Name of New R	egistered Agent		· · · · · · · · · · · · · · · · · · ·			
		(Florida street address)				
New Registered	Office Address:	(City)	, Florida(Zip Code)			
		-				
lew Registered Agent' hereby accept the appo	s Signature, if changing Regis intment as registered agent. I	tered Agent: am familiar with and acc	cept the obligations of the position.			

Signature of 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.

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)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	Antonio Silva	3381 SW Hill Street
Add			Port St Lucie FL 34953
Remove			
2) Change	P	Antonio Silva	3381 SW Hill Street
Add			Port St Lucie FL 34953
Remove			
3) Change	D	Joshua Bento	2471 SE Shell Avenue
Add			Port St Lucie FL 34952
Remove			
4) Change	VP	Joshua Bento	2471 SE Shell Avenue
Add			Port St Lucie FL 34952
Remove			
5) Change		_	
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
•	
V 100 W 000	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(ij noi appaeable, mateure WA)	

The date of each amendment(s) adoption: 172772013 date this document was signed.	, if other than th
Effective date if applicable: 1/27/2015	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendaby the shareholders was/were sufficient for approval.	nent(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following so 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"	
(voting group)	•
The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required.	cholder
The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required.	ler
Dated 1/27/2015	
X Signature Motorii a Silver	
(By a director, president or other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that fiduciary)	
Antonio Silva	
(Typed or printed name of person signing)	
President	
(Title of person signing)	