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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	G Kim Dee, I	Ρ.Λ.				
DOCUMENT NUMBER:	D10000025107					
The enclosed Articles of Amer	adment and fee are sul	bmitted for filing				
Please return all corresponden	ce concerning this ma	tter to the followi	ng:			
	Kimbe	rlee J. De Bias	se. Esq.			
		Name of Cont	act Person			
	Breger	De Biase, PLI	L.C			
		Firm/ Cor				
	200 S.	Park Road, Su	•			
		Addre	······································	 		
	Hollywood, FL 33021					
City/ State and Zip Code					- 	
	kim@l	odblawyers.co	ווו			
<u> </u>	mail address: (to be us	-		notification)		
For further information concer	ning this matter, pleas	se call:				2
Kimberlee J. De	· Biase - Esa		561	225 - 2676		2022 SEP 2
Name of Conta		at (Arun Cov	1 225 - 2676 de & Daytime Telephone Nu	mber =	Ť.
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Enclosed is a check for the fol	lowing amount made	payable to the Flo	orida Depa	rtment of State:		-41
•	\$43.75 Filing Fee & Certificate of Status	S43.75 Filin Certified Co (Additional c enclosed)	py _	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		Fii 3: 36
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314			Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 81 ussee, FL 32303	0	

Articles of Amendment Articles of Incorporation of

Kim Dec. P.A.

Check if applicable

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

(Name of Corporation as currently filed with the Florida Dept. of State) P19000025406 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 595 S. Federal Hwv B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Suite 620 Boca Raton, FL 33432 C. Enter new mailing address, if applicable: 595 S. Federal Hwy (Mailing address MAY BE A POST OFFICE BOX) Suite 620 Boca Raton, FL 33432 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent 595 S. Federal Hwv. Suite 620 (Florida street address) Boca Raton New Registered Office Address: . Florida (City) 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

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>P1</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I } Change	p	Kimberlee J. De Biase	1200 N. Federal Hwy
Add			Suite 200
X Remove			Boca Raton, FL 33432
2) Change	р	Kimberlee J. De Biase	595 S. Federal Hwy
X Add			Suite 620
Remove 3) Change			Boca Raton, FL 33432
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
61 Change		***************************************	
Add			
Remove			

an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (If not applicable, indicate N34)		(Be specific)	
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> : (no more than 90 days after ame	
(no more than 90 days after ame	endment file date)
Note: If the date inserted in this block does not meet the applicable statutory f document's effective date on the Department of State's records.	iling requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of director action was not required.	rs without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders. The number of vote by the shareholders was/were sufficient for approval.	es east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting gromust be separately provided for each voting group entitled to vote separately	
"The number of votes cast for the amendment(s) was/were sufficient for	approval
by	
(voting group)	
Dated 09/20/2022	
Signature Kimberlee De Biase	
(By a director, president or other officer – if directors selected, by an incorporator – if in the hands of a rec appointed fiduciary by that fiduciary)	
Kimberlee J. De Biase	
(Typed or printed name of person	signing)
Authorized Representative	
(Title of person signing)	·· ········ ·