## 420515

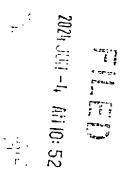
(Re	equestor's Name)	<del></del>				
<u></u>						
(Address)						
(Address)						
(Cit	ty/State/Zip/Phone	o #0				
(Cil	ty/State/Zip/Ffi011	e #)				
PICK-UP	MAIT	MAIL				
/D.	siness Entity Nar	70)				
00)	Siliess Citity 14at	ne)				
	cument Number)					
(50	cament Namber)					
Certified Copies	_ Certificates	Certificates of Status				
Special Instructions to Filing Officer:						

Office Use Only



400430905924

08/04/24--01037--017 \*+35.00





## Articles of Amendment

to
Articles of Incorporation

	of	tion		
	<del>-</del> ··		Pl	. 36
Non- of Compression	ng cour Ave	とついて with the Florid	la Dept. of State)	الماري المعدد المارية
(Ramit of Corporact		ritir tije I lerit	2024 JUN -1	
Pogua	1420518 nent Number of Corpor	ration (if known		<del>* - #:1 10: 5</del> 2
,	_		٠	
ursuant to the provisions of section 607.1006, Florida s Articles of Incorporation:	Statutes, this <i>Florida</i>	Profit Corpore	ation adopts the followin	g amendment(s)
. If amending name, enter the new name of the co	rporation:			
				The new
ame must be distinguishable and contain the word "co lnc.," or Co.," or the designation "Corp," "Inc," chartered," "professional association," or the abbre	" or "Co". A profes	y," or "incorpo ssional corport	rated" or the abbreviation name must contain	on "Corp.," n the word
. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADD</u>	<u>:</u> DRFSS )			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>x</u> )			
		~		<del>,</del>
. If amending the registered agent and/or register new registered agent and/or the new registered	red office address in l office address:	Florida, enter	the name of the	
Name of New Registered Agent				_
	<del></del>			
	(Fiorida strees addr	.e22)		<b>-</b>
	·		. Florida	
New Registered Office Address:	(City)			Code)
	. ,			
ew Registered Agent's Signature, if changing Reg	intered Agent:			
hereby accept the appointment as registered agent.	I am familiar with and	d accept the ob.	ligations of the position	
Sign	ature of New Registers	ed Avent, if cha	nging	_
Gig/ii	c cy 1.011 100gillion		0 0	

Check if applicable

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

. <u>If amending or add</u> (Aπach <i>additional sh</i>	ling additional Articles teets, if necessary). (I	s, enter change(s) Be specific)	nere:		
	· · · · ·				
			<del> </del>		
			<del></del>		
<del></del>			<del></del>		
	-				
			·	· · · · · · · · · · · · · · · · · · ·	
				<b></b>	
	-				
,,,					
		<del></del>	<del></del>		
			<u> </u>		
-	<b>~</b>				
		1 15 .21.	llation	Ciarund abuses	
provisions for imp	rovides for an exchan elementing the amend	ge, reciassification ment if <u>not conta</u>	ined in the amendr	nent itself:	
(if not applicat	ble, indicate N/A)	•			
	<u></u>				