639261

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Anabah Investmen	t Corporation Inc	
DOCUMENT NUM	620261		<u> </u>
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Mey Cruz		
		Name of Contact Persor	1
	First Horizon Bank		
		Firm/ Company	
	450 E Las Olas Blvd Ste 122	0	
		Address	
	Fort Lauderdale, FL 33301		
		City/ State and Zip Code	<u> </u>
	mlcruz@firsthorizon.com	16.6.	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call:	
Mey Cruz		at (954	768-5337
Name	of Contact Person	at (Area Co) de & Daytime Telephone Number
Parala da Albania da da la F	Santa (511au de menor)	ti	and the second and Chanter
Enclosed is a check i	or the following amount made	payable to the Florida Depa	irtment of State:
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Di P.C	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Anabah Investment Corporation Inc			
(Name	of Corporation as curren	tly filed with the Florida 1	Dept. of State)
639261			2024 UCT - 1 AH 1:30
	(Document Number	of Corporation (if known)	TALL TO CONTROL
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporatio	n adopts the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:		
		_	The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "("chartered," "professional association,"	Corp," "Inc," or "Co".	A professional corporatio	
B. Enter new principal office address,	if applicable:	First Horizon Bank c/o	Mey Cruz
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	450 E Las Olas Blvd S	twe 1220
		Fort Lauderdale, FL 33301	
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>			
D. If amending the registered agent at new registered agent and/or the ne Name of New Registered Agent			name of the
Nume of New Registered Agent	First Horizon Bank c/o V	1ey Cruz 450 E Las Olas Bl	
		-	
	(Florida street address) Ft Lauderdale 33301		33301
New Registered Office Address:		(City)	, Florida (Zip Code)
New Registered Agent's Signature, if o	changing Registered Agei	<u>11:</u>	
I hereby accept the appointment as regis	tered agent. I am familiai	r with and accept the obliga	tions of the position.
	Signature of New	Registered Agent, if changi	no
	Signature of New	regimered regem, if endings	*6
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)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>P</u>	Olga Dreke	1470 NW 107 Ave Ste 10-i
x Add			Miami, FL 33172
Remove			
2) Change	VS	Mayra Eguez	1470 NW 107 Ave Ste 10-i
x Add			Miami, FL 33172
Remove 3) Change	P	Joseph Covas	One Alhambra Plaza, Ste 800
Add			Coral Gables, FL 33134
x Remove			
4) Change	<u>v</u>	Erika Benedict	One Alhambra Plaza, Ste 800
Add			Coral Gables, FL 33134
X Remove			
5) Change	<u>S</u>	Cynthia Prichard	One Alhambra Plaza, Ste 800
Add			Coral Gables, FL 33134
X Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
	
<u> </u>	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(***	The second secon
(if not applicable, indicate N/A)	

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
10/1/2024 Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	tion and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	t(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
Dated	
Signature (By a director, president or other officer - if directors or officers have not beer	<u></u>
selected, by an incorporator – if in the hands of a receiver, trustee, or other con	ı urt
appointed fiduciary by that fiduciary)	••••
Mey Cruz	
(Typed or printed name of person signing)	
Director	

(Title of person signing)