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## Law Offices of

## ROLFE & LOBELLO, P.A.

#### Attorneys and Counselors at Law

233 EAST BAY STREET, SUITE 720 JACKSONVILLE, FLORIDA 32202

LAWRENCE C. ROLFE THOMAS LOBELLO, III AMANDA C. ROLFE MARK J. HORNE PLEASE REPLY TO
MAILING ADDRESS:
POST OFFICE BOX 4400
JACKSONVILLE, FLORIDA 32201-4400

TELEPHONE (904) 358-1666 FAX NO. (904) 677-5836 WEB SITE: ROLFELAW.COM

July 19, 2021

Amendment Section
Division of Corporations
FLORIDA DEPARTMENT OF STATE
P.O. Box 6327<sup>1</sup>
Tallahassee, FL 32314

RE: The Blackstone Building, Inc.

Document No.: 728162

Dear Sir or Madam:

The enclosed Articles of Amendment and fee are submitted for filing regarding the above-referenced matter. Please return all correspondence concerning this matter to the following:

Lawrence C. Rolfe, Esquire Rolfe & Lobello, P.A. P.O. Box 4400 Jacksonville, FL 32202-4400

Enclosed please find our firm's check in the amount of \$35.00 payable to Department of State representing the filing fee. For further information concerning this matter, please call Lawrence C. Rolfe, Esquire at (904) 358-1666.

Sincerely,

TĬNA M. MOCHOWSKI

Legal Assistant

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#### 11

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the	Florida I	Jent of States	<del></del>	•	
728162		zepti or triate,			
	. 21 1	6.6	. ('61)		-
(Docum	ient Numb	er of Corporatio	on (11 Known)		
Pursuant to the provisions of section 617,1006, Floramendment(s) to its Articles of Incorporation:	rida Statute	es, this <i>Florida</i> i	Not For Profit Corp	oration adopts the f	ollowing
A. If amending name, enter the new name of the	e corporat	ion:			
N/A					The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	<u>s</u>	tion" or "incorp	porated" or the abbr		
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A					2
(Trincipal byfice address <u>19031 be A 31Re et A</u>	DDRLDD	, 		<u> </u>	202 JUL 23
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C. Enter new mailing address, if applicable:		N/A		[ [ [ [ ] ]	
(Mailing address MAY BE A POST OFFICE)	BOX)			<del>Čáca</del> . Čáca	-2-
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				근걸	07
D. If amending the registered agent and/or regis			<u>lorida, enter the na</u>	me of the	
new registered agent and/or the new register		iddress:			
Name of New Registered Agent:	N/A			<u></u>	
	N/A				
	-		(Florida street addr	ecc)	
New Registered Office Address:					
	N/A			, Florida	
		(City)		(Zip Code)	•
Nam Danietaund Amant's Cianatura if abancing I	Dagietarad	A countr			
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen			accept the obligation	is 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 Doc, 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 Do           V         Mike Jo           SV         Sally Sn	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) <u>×</u> Change Add	<u> </u>	SMITH, DAVID W.	233 EAST BAY STREET SUITE 1001
Remove	•		JACKSONVILLE, FL 32202
2) × Change Add	<u>S/T</u>	ROLFE, LAWRENCE C.	233 EAST BAY STREET SUITE 720
Remove 3 ) Change Add × Remove	D	SWANSON, JOHN P.	JACKSONVILLE, FL 32202  233 EAST BAY ST, SUITE 1101  JACKSONVILLE, FL 32202
4) Change × Add	D	ROBBINS, DAVID M.	233 EAST BAY STREET SUITE 1125
Remove 5) Change Add			JACKSONVILLE, FL 32202
Remove 6) Change Add Remove			
		cles, enter change(s) here: (Be specific)	
N/A			

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	doption:	
Effective date if applicable:	(no more than 90 days after amendment file date)	· ·
	ock does not meet the applicable statutory filing requirements	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes east for the a	unendment(s)

07/19/2021
Dated
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 C. ROLFE
(Typed or printed name of person signing)
Secretary/Treasurer
(Title of person signing)