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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: HAFNER FERLIT	'A ARCHITECTS, INC.		
DOCUMENT NUM				
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Joseph C. Hafner			
		Name of Contact Person		
	Hafner Ferlita Architects, Inc			
		Firm/ Company		
	417 South Hyde Park Avenue	• •		
		Address		
	Tampa, FL 33606			
		City/ State and Zip Code	<u> </u>	
jhain ——	er@hafnerarch.com	10.0		
	E-mail address: (to be us	sed for future annual report	notification)	
		.,		
For further information	n concerning this matter, pleas	se call:		
Joseph C. Hafner		at (253-0421	
Name of Contact Person		Area Code & Daytime Telephone Number		
Contourd is a about fo	or the following amount made	noveble to the Florida Deno	etmant of Status	
nnciosed is a check to	or the following amount made p	payable to the Florida Depa	runent 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building		

Taliahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as cu	rrently filed with the Fl	orida Dept. of State)	
F12249			
(Document Nur	nber of Corporation (if ki	nown)	
Pursuant to the provisions of section 607,1006, Florida Statute its Articles of Incorporation:	s, this <i>Florida Profit Cor</i>	poration adopts the follow	ring amendment(s) to
A. If amending name, enter the new name of the corporati	on:		
			The new
name must be distinguishable and contain the word "corp "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc. word "chartered," "professional association," or the abbrevio	" or "Co". A profession		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		ter the name of the	19 Mar - 6 PM 6: 30
(Flo	rida street address)		
New Registered Office Address:	(Cuy)	Florida(Z)	ip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	Agent: niliar with and accept the	obligations of the position	п.

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.

Example: X Change	<u>PT</u>	John Doe	
\underline{X} Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VD	Kenneth C. Ferlita	417 South Hyde Park Avenue
Add	<u> </u>		Tampa, FL 33606
X Remove			
2) Change			
Add			<u> </u>
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Famending or adding additional Art Attach additional sheets, if necessary).	(Be specific)				
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an amendment provides for an exc	hanas maalassifi	antion of sono	Matian of icens	ed charge	
provisions for implementing the am	nange, recrassin endment if not c	ontained in the	amendment its	elf:	
(if not applicable, indicate N/A)					
-		<u>-</u>			
					 -
				_ .	
	-				

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement 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 shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated March 4, 229	
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Joseph C. Hafner	
(Typed or printed name of person signing)	
President and Director	

(Title of person signing)