## F26156



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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: UNITED FINANC	TAL GROUP, INC.									
DOCUMENT NUM	F 26156										
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:									
	CRYSTAL GOTTSCHALK										
	Name of Contact Person										
	UNITED FINANCIAL GROUP, INC.										
		Firm/ Company									
	PO BOX 941313										
	_	Address	<del></del>								
	MAITLAND, FLORIDA 32	794-1313									
		City/ State and Zip Code	:								
	CRYSTAL@UFG-LEASE.C	COM									
	E-mail address: (to be us	sed for future annual report	notification)								
	on concerning this matter, pleas		<b>(20.8111</b>								
ANDREW KAPLA		at (	de & Daytime Telephone Number								
Name	of Contact Person	Area Co	de & Daytime Telephone Number								
Enclosed is a check	or the following amount made	payable to the Florida Depa	artment of State:								
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)								
Ai Di P.	nailing Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810									

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

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(Name o	of Corporation as cur	rently filed with the F	lorida Dept. of State)
F 26156			
· ·	(Document Numl	per of Corporation (if k	nown)
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes,	this <i>Florida Profit Con</i>	rporation adopts the following amendment(s)
. If amending name, enter the new na	ame of the corporation	<u>n:</u>	
₹A			The new
ame must be distinguishable and contain Inc.," or Co.," or the designation "C chartered," "professional association."	Corp," "Inc," or "Co	". A professional con	orporated" or the abbreviation "Corp" rporation name must contain the word
3. Enter new principal office address,	if annlicable:	NA	
Principal office address MUST BE A S		·	
		-	
			20
2. Enter new mailing address, if appl	icable		
(Mailing address MAY BE A POST		NA	
			<u> </u>
). If amending the registered agent_ar	nd/or registered office	address in Florida, er	<i>~</i> ., <i>□</i>
new registered agent and/or the new			
Name of New Registered Agent	NA		
The state of the s			
	(Flori	da street address)	
	NA		
New Registered Office Address:		(City)	, Florida (Zip Code)
		1 41 5/2	• •
New Registered Agent's Signature, if c	hanging Registered A	gent:	
hereby accept the appointment as regist	tered agent. I am fami	liar with and accept the	e obligations of the position.
	Signature of M	lew Registered Agent, ij	f changing
	Signature of tv	en negisiereu zigeni, ij	changing
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)

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> <u>John</u>	<u>.Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	CEO	HAROLD J. KAPLAN	1133 LOUISIANA AVE.
Add			SUITE 200
X Remove			WINTER PARK, FL 32789
2) Change	TCB	HAROLD J. KAPLAN	1133 LOUISIANA AVE.
Add			SUITE 200
X			WINTER PARK, FL 32789
Remove 3 ) Change	CEO	ANDREW KAPLAN	1133 LOUISIANA AVE.
X Add			SUITE 200
Remove			WINTER PARK, FL 32789
4) Change	TC	ANDREW KAPLAN	1133 LOUISIANA AVE.
X Add			SUITE 200
Remove			WINTER PARK, FL 32789
5) Change			
Add			
Remove			
6) Change			
Add			
_ Remove			

E. <u>If an</u> (Attac	nending or adding additional A The additional sheets, if necessary	articles, enter chang (i) (Re specific)	<u>e(s) here</u> :		
NA NA	it dadamina succis, y necessar,	y. (Be specific)			
IN/A		<del> </del>			
				<u> </u>	w
	<u> </u>				
		•	<u>-</u>		
	<del> </del>	•		·	
		<del></del>			
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				-	
	<del> </del>		<del>.</del>		
F. <u>If an</u>	amendment provides for an e	<u>xchange, reclassific</u>	ation, or cancellat	<u>ion of issued shares,</u>	
<u>pro</u>	visions for implementing the a (if not applicable, indicate N/A)	mendment if not co	ntained in the amo	endment itself:	
	(у посаррисавіе, іпаксате хух.	1			
NA 				·	
		<del></del>			
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			<u> </u>		
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	14:	7/20/2/	724	, if other than the
The date of each amendment(s) addate this document was signed.	•	1 120 120	<del>/_</del>	, If other than the
Effective date if applicable:	TEMBER 23, 202 		fter amendment file date	
Note: If the date inserted in this b document's effective date on the De			dutory filing requiremen	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK	ONE)		
The amendment(s) was/were ado action was not required.	pted by the incorp	oorators, or board of	directors without sharel	nolder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su			er of votes east for the an	nendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the share each voting group	cholders through vo centitled to vote sep	ting groups. The following arately on the amendme	ing statement ut(s):
"The number of votes cast	for the amendmen	ıt(s) was/were suffic	ient for approval	
by NA			<u></u>	
	(voting gre	oup)		
SEPTEMB Dated	ER 23, 2024			
Signature				<del>,</del>
selected		tor – if in the hands	firectors or officers have of a receiver, trustee, or	
	ANDREW KAPI	LAN		
	(Typeo	l or printed name of	person signing)	<u> </u>
	PRESIDENT			
	(Title o	of person signing)		