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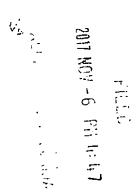
| (R | (equestor's Name | |
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| (A | ddress) | |
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| PICK-UP | ☐ WAIT | MAIL |
| (B | Business Entity Nar | me) |
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| · · · · · · · · · · · · · · · · · · · | Ocument Number) | 1 |
| , | | , |
| Certified Copies | Certificate | s of Status |
| Special Instructions to | o Filing Officer: | |
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Office Use Only



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C. GOLDEN NOV 0 8 2017

COVER LETTER

TO: Amendment Section Division of Corporations

| Division of Corp | orations | | |
|------------------------|--|--|---|
| NAME OF CORPO | RATION: FLAMINGO WEST. | INC. | |
| | V 12950 | | |
| DOCUMENT NUM | BER: | | |
| | s of Amendment and fee are subm | | |
| Please return all corr | espondence concerning this matter | to the following: | |
| | MICHAEL H. HIRSCH, ESQ. | | |
| | | Name of Contact Person | |
| | MICHAEL H. HIRSCH, P.A. | | |
| | | Firm/ Company | |
| | 650 SE 3RD AVE | | |
| | | Address | |
| | FORT LAUDERDALE, FL 33 | 3301 | |
| | | City/ State and Zip Code | |
| | | 11 May ann | |
| ric | kwest101@comcast.net/mhh@n | hirschiaw.com | otification) |
| | E-mail address: (to be use | ed for future annual report no | |
| | | | |
| For further informa | ation concerning this matter, please | e call: | |
| Michael H. Hirsch | 1 | 954 at (| 462-7393 |
| | me of Contact Person | Area Cod | e & Daytime Telephone Number |
| | | and a cha Florida Denat | tment of State: |
| Enclosed is a chec | k for the following amount made p | payable to the Florida Depar | |
| □ \$35 Filing Fe | e □\$43.75 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) |
| | Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Amend Divisio Clifton 2661 E | Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301 |

Articles of Amendment to Articles of Incorporation of

FILEL

2017 NOV -6 PH 4: 47

| FLAMINGO WEST, INC. | orporation as currently filed w | ith the Florida Dept. of State) |
|--|---|---|
| (Name of C | orporation as currently inves | 34 |
| K 13850 | | |
| | (Document Number of Corpora | ition (IT Known) |
| | C. Worlda Statutes, this Florida | Profit Corporation adopts the following amendment(s) |
| Pursuant to the provisions of section 607.100 | 6, Plotida Statutest time | |
| its Articles of Incorporation. | | |
| A. If amending name, enter the new name | of the corporation: | |
| A. It amenome | | The new |
| name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designati word "chartered," "professional associatio | n the word "corporation," "co on "Corp," "Inc," or "Co", A n," or the abbreviation "P.A." | mpany," or "incorporated" or the abbreviation I professional corporation name must contain the |
| B. Enter new principal office address, if | applicable: — | |
| B. Enter new principal office address, W. (Principal office address MUST BE A STE | REET ADDRESS) | |
| | | |
| | | |
| | | |
| C. Enter new mailing address, if application (Mailing address MAY BE A POST O | <u>able:</u> FFICE BOX) — | |
| (Matting data ess Miles | | |
| | _ | |
| | | |
| | . em . ddungg in | Florida, enter the name of the |
| D. If amending the registered agent and | d/or registered office address in | 10102, |
| D. If amending the registered agent and new registered agent and/or the new | | |
| Name of New Registered Agent | RICK WEST | |
| Name of New Registered Agent | 101 SE 14TH ST | |
| | (Florida street ac | ldress) |
| | FORT LAUDERDALE | 33316 Florida |
| New Registered Office Address: | | (Zip Code) |
| New Negationes - | (City | , |
| | | |
| | | |
| New Registered Agent's Signature, if | hanging Registered Agent: | the obligations of the position. |
| New Registered Agent's Signature | tered agent. I am familiar with | and accept the obligations of the position. |
| I hereby decept the off | | |
| | | |
| | 1 111 | |
| | - Signature of New Regi. | stered 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 | |
| X Remove | <u>V</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| (Check One) | PTD | RICK WEST | 101 SE 14TH ST |
| 1) X Change | | | FORT LAUDERDALE, FL 33316 |
| Add | | | |
| Remove | | | |
| 2) X Change | VSD | LEE WEST | 101 SE 14TH ST |
| Add | | | FORT LAUDERDALE, FL 33316 |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | _ | | |
| Add | | | |
| Remove | | | |

| Attach additional sheets, if necessary). | rticles, enter change(s) here: (Be specific) | |
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| 16 amandment provides for an 6 | exchange, reclassification, or cancellation of issued shares, | |
| provisions for implementing the a | amendment if not contained in the amendment itself: | |
| (if not applicable, indicate N/A | | |
| /A | | |
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| , if other than the |
|---|
| The date of each amendment(s) adoption: 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 will not be listed as the document's effective date on the Department of State's records. |
| 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 |
| ☐ 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 10/27/17 |
| 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) |
| LEE WEST |
| (Typed or printed name of person signing) |
| DIRECTOR / SHAREHOLDER |
| (Title of person signing) |