K 85326

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TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: DAVIDSON DEVELOPMENT, INC. DOCUMENT NUMBER: K85326
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person Name of Contact Person EVE WP nont, Inc. Firm/ Company
St. Down Place Address City/ State and Zip Code The Code of the
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (904) 707 - 3528 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment

to

Articles of Incorporation

	of
DVIDSON DE	veropment + ~ C
(Name of Corporation as co	urrently filed with the Florida Dept. of State)
K US3	26
(Document Nu	imber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporat	tion:
	The new
name must be distinguishable and contain the word "corporate "Inc.," or Co.," or the designation "Corp." "Inc," or "Cartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Corp.," Co". A professional corporation name must contain the word "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)
	DIX : 3
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(umng undress MATT BEATT VALLED TO A	9 .
	
	
D. If amending the registered agent and/or registered offi	ice address in Florida, enter the name of the
new registered agent and/or the new registered office a	address:
Name of New Registered Agent	
	\ \ \ \
(Flo	orida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fac	Agent: miliar with and accept the obligations of the position.
	NIR
Signature of	New Registered Agent, if 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 <math>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>	Doe			
X Remove	<u>V</u> <u>Mike</u>	e Jones			
X Add	<u>SV</u> <u>Sally</u>	<u>c Smith</u>			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address	
1) Change	V.P	FREDE	nick P Po	MAN, In	
Add Remove 2) Change	<u> 1.P</u>	Jane	ES S. DAVI	100 E. Town Y1 51. Ayrding, 7 3209	70 [] [
Add Remove Change Add				100 E. Town St. Augustine, F	Pip Zug
Remove 4) Change Add					
Remove 5) Change Add			<u>.</u>		
Remove 6) Change Add Remove					

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in amendment provides	s for an exchange, reclass	sification, or cancellation of	fissued shares,
ovisions for implement (if not applicable, indi	ting the amendment it no icate N/A)	t contained in the amendm	ent itself:
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The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, thi partment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendm fficient for approval.	ent(s)
	roved by the shareholders through voting groups. The following staeach voting group entitled to vote separately on the amendment(s):	tement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
· · · · · · · · · · · · · · · · · · ·	(voting group)	
selecte	rector, president or other officer – if directors or officers have not be i, by an incorporator – if in the hands of a receiver, trustee, or other ed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	V.D. + rensuren	
	(Title of person signing)	