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A. RAMSEY APR 30.2024

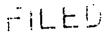
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Sale Insurance Age	mey Inc.						
	BER:							
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.						
Please return all corre	espondence concerning this ma	tter to the following:						
	Robert Sale							
	Name of Contact Person							
	Firm/ Company							
	2505 Hollingsworth Hill Ave. Address							
	Lakeland, FL 33803							
	City/ State and Zip Code							
	brittanyhsale@gmail.com							
	E-mail address: (to be us	sed for future annual report	notification)					
For further informati	on concerning this matter, pleas	se call:						
Robert Sale		at (<u>863</u>	_) 660-0501					
Name	of Contact Person	Area Co	Area Code & Daytime Telephone Number					
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment 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 Tallahassee, 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



Sale Insurance Agency Inc. (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Streamline's Way, Inc. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." n/a B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: n/a (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: _ (Zip Code) (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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, at 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 hel 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doc		
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s
1) Change	n/a	n/a 		n/a
Add				
Remove				
2) Change				
Add				
Remove 3) Change			<u></u>	
Add				
Remove				
4) Change		v a	, marine and marine	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional sheets, i.	f necessary). (Be spec	cific)			
n/a					
\$ 1.21.					
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 If an amendment provide provisions for implement 	<u>es for an exchange, rec</u> nting the amendment i	classification, or c f not contained in	ancellation of issu the amendment i	tself:	
(if not applicable, in	dicate N/A)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
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04/06/2024 The date of each amendment(s) adoption: _ , if other than t 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 to 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 incorporators, or board of directors without shareholder action and shareholder action was not required. ☐ 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 (voting group) 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) Robert H. Sale (Typed or printed name of person signing)