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	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	(Business Entity Name)	
	(Business Eighty Name)	
	(Document Number)	
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DIVISION OF CORPORATION

COVER LETTER

TO: Amendment Section
Division of Corporations

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NAME OF CORPORATION: 2344 H	eusen heme	Contoninion, Tue
DOCUMENT NUMBER: NOSOOC	_	
The enclosed Articles of Amendment and fee are sub		
Please return all correspondence concerning this matter	er to the following:	
Crisa To		
Craig J. Boun	(Name of Contact Perso	n)
2344 Housan have C	المستسملين	- TIM
	(Firm/ Company)	,
2344 Housen Lane,	(24) 2.	
2011 Hausen Level	(Address)	
Tallchasses F1 32	301	
Tallahassee, FL 32	(City/ State and Zip Cod	e)
al alladian		
Cbrown @ cjb-law. E-maileddress: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
1 . 30	10	~
(Name of Contact Person)) at <u>C</u>	rea Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Dep	artment of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address		Address
Amendment Section Amendment Section Division of Corporations Division of Corporations		
P.O. Box 6327		entre of Tallahassee
Taliahassee, FL 32314		N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)	
2344 Housenhave Condoninium, Enc NOS000013	2745
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the amendment(s) to its Articles of Incorporation:	e following
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." "Company" or "Co." may not be used in the name.	The new for "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 2344 Housen have, Dis	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 2344 Hausen Lone, C. Tallahassee, FL 3230	<u>i</u> 2
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: Craica J. Brown	
Name of New Registered Agent: 2344 Hausen Lane, Wit 2 New Registered Office Address:	<u></u>
Callahassee , Florida 32 (City) (Zip Code)	1301
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 Rayistered Agent, if changing	20
~	\sim

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 X.Remove X.Add		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	CID	Creins J. Brown	2344 Housenhouse Drit 2 Tallahassee FL 32501 2344 Housen Lane Drit 1
Remove			Tallahassag FL 32301
2) Change Add	\mathcal{D}	Kimberly Christian	2344 Housen Lauc
Remove 3) Change Add Remove		-	Tallahassee, FL32301
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add Remove			
E. If amending or a	dding additional A sheets, if necessary)	rticles, enter change(s) here: . (Be specific)	
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The date of each amendment(s) adoption:	, if other than th
Effective date if applicable: Dovember 30,2023	
Effective date if applicable: Onember 30, 2023 (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 adocument's effective date on the Department of State's records.	not be listed as the
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will	not be listed as the

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 100 2023
Signature (By the chairman or vice chairman of the board, president or other officer-if directors
have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
Qresident
(Title of person signing)