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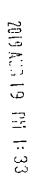
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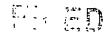
<u></u>
TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Palmetto Expressivay Business Park Condominion
DOCUMENT NUMBER: N 0600009731
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Torge Carnelate (Name of Contact Person)
(Name of Contact Person)
Son City Condo Solvinous (Firm/Company)
(Firm/ Company)
1301 NW 59 th CT Svite 202
(Address)
Pleavil (Pl 33172 (City/ State and Zip Code)
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Torge Carmerate. (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee S43.75 Filing Fee S43.75 Filing Fee Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status (Additional Copy is Enclosed)

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327

Street Address
Amendment Section Division of Corporations Clifton Building

Articles of Amendment

to Articles of Incorporation



Palmetto Expression as currently filed with the Florida Dept. of State) 0600009731 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006. Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: 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." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (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: (Citv) (Zip Code) 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

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	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) K Change Add Remove	P	Hichael Cabak	1301 NW Squ CT Sorre ZOZ HIAMI, FC 33172
2) Change Add Remove	V	Raymond Baker	1301 NW SGHL CT SUTTE ZOZ Alimii, FC 33172
3) <u>X</u> Change Add Remove	<u>T</u>	Andrès Barbasa	1301 NW 89m ET SUITE 202 MIANI, FL 33172
4) Change Add Remove	<u>D</u>	Angie Forte	1301 DW 8941 CT Some 202 MIAHI PC 33172
5) Change Add Remove	D	20is E Valdez	1301 DW 89+4 CT SoTTR ZOZ HIAMI PC 33172
6) Change Add Remove	PD	Vicor Finalet	1301 NW F9T CT Suite 202 AliAmil FC 33172
7		Page 2 of 4	··

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.

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Example: X Change X Remove X Add	<u>V</u> <u>Mik</u>	<u>n Doe</u> e Jones y <u>Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
Change Add Remove	<u>yP</u>	Roy Cisners	1301 NW 89th CT SUITE ZOZ HIAMI PC 33172
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

tach additional sheets, if necessary).	cles, enter change(s) here (Be specific)			
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	Feach amendment(s) adoption: 8 19	19, if other	r than
Effective d	ate if applicable:		
	(no more than 90 days after	хтепатені зне ааte)	
Note: If the document's	e date inserted in this block does not meet the applicable state effective date on the Department of State's records.	utory filing requirements, this date will not be listed a	is the
Adoption (f Amendment(s) (CHECK ONE)		
☐ The ar	mendment(s) was/were adopted by the members and the numere sufficient for approval.	ber of votes cast for the amendment(s)	
There adopt	are no members or members entitled to vote on the amendment by the board of directors.	ent(s). The amendment(s) was/were	
	Dated 8/14/19		
	Signature EV al	46	
	(By the chairman or vice chairman of the board, have not been selected, by an incorporator – if i other court appointed fiduciary by that fiduciary	n the hands of a receiver, trustee, or	
	1015 eV		
	(Typed or printed na	me of person signing)	
	NI VEC	TOV	
	(Title of	1	