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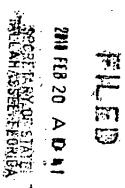
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## **COVER LETTER**

Division of Corporations
NAME OF CORPORATION: Common Chity, Inc
DOCUMENT NUMBER: WOSCOCO 7935
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Babarataley
(Name of Contact Person)
(Firm/ Company)
25115W15°5t
(Address)
Deemeld Poh. FL 33442
(City/ State and Zip Code)
E-mail address: (to be used for future annual report not fication)
$\mathcal{I}$
For further information concerning this matter, please call:
Bertona Hola, at \$ 754-227-7738
(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  \$\Bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee & \Bigcup \\$52.50 Filing Fee  Certificate of Status
Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy
enclosed) (Additional Copy is
Enclosed)
Mailing Address Street Address
Amendment Section Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment

to

Articles of Incorporation
0 of
Commonanti, Inc.
(Name of Corporation as currently filed with the Plorida Dept. of State)
NAMO 7935
(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 following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:  The new
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)
<del></del>
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:
<u> </u>
Name of New Registered Agent: Xinet Rihl
3389 Cocoplum Circle (Florido street address)
New Registered Office Address:
Coconst Creek Florida 1 33063
(City) (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.
Tout Relie
Signature of New Registered Agent, if changing
Page 1 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.

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 Doc, 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 I V Mike SV Sally:	<u>Jones</u>	
Type of Action (Check One)	<u>Tide</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	P	Baba-ahday	25115W15°5t Deerred Br. FE 33442
2) Add	<u>ND</u>	Nellie Murphy	3200 Port Poyale DN #2008
Remove 3 ) Change Add	SI	Innet Rihl	7. landerdale, FL 33308 3389 Cocoplum arche
Remove		1	Coconut Creek, FT 33063
4) Change Add Remove	-N/	A	
5) Change Add Remove	N	<i>A</i>	
<ul><li>6) Change</li><li> Add</li><li> Remove</li></ul>	-N	/A	
Kemove	1	Page 2 of 4	

tach additional sheets, if necessary).	(Be specific)			
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The date of each amendment(s) adoption: /// 8 date this document was signed.	_, if other than the
Effective date if applicable: /// 8  (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 document's effective date on the Department of State's records.	oe listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.  Board of Directors not members 24  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 2/14/18	
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)	
Berbon Halay	
(Typed or printed name of gerson signing)	
- tresidant	
(Title of person signing)	