N0900006586

(Requestor's Name)
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PICK-UP	WAIT MAIL
	Business Entity Name)
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A. RAMSEY



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

Date:10/	/31/2024	
Name:	Cheyanne Davis	-
Reference #:	2537805	_
Entity Name:	DAVE'S	HOUSE, INC.
Articles of	f Incorporation/Authorization	to Transact Business
✓ Amendme	ent	
Change o	of Agent	
Reinstate	ment	
Conversion	on	
Merger		
Dissolutio	on/Withdrawal	
Fictitious	Name	
Other		
Authorized Amor	unt: \$35.00	
Signature:	Orymo Paire	

F: 800.944.6607



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F: 866.625.0839

COGENCYGLOBAL.COM

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Date:	10/31/2024	
Name:	Cheyanne Davis	_
Reference #	2537805	_
	DAVE'S	HOUSE, INC.
Article	es of Incorporation/Authorization	to Transact Business
✓ Amer	ndment	
☐ Chan	ge of Agent	
Reins	statement	
Conv	ersion	
☐ Merg	er	
Disso	olution/Withdrawal	
☐ Fictiti	ous Name	
☐ Other		
Authorized A	Amount: \$35.00	
Signature:	(Vryma Paine	

F: 800.944.6607

Articles of Amendment to Articles of Incorporation of

FILED 2024 OCT 31 PM 12 37

Dave's House, Inc.	[מני -	2, 44 of 51015.
Name of Corporation as currently filed with the Florida Dept. of State	9 3	West El
N09000006586		
(Document Number of Corpora	tion (if known)	
Pursuant to the provisions of section 617.1006. Florida Statutes, this <i>Florida</i> amendment(s) to its Articles of Incorporation:	lu Not For Profit Corpo	oration adopts the following
A. If amending name, enter the new name of the corporation:		
		The nev
name must be distinguishable and contain the word "corporation" or "inc "Company" or "Co." may not be used in the name.	orparated" or the abbr	eviation "Corp." or "Inc."
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 new registered agent and/or the new registered office address:	1 Florida, enter the na	me of the
Name of New Registered Agent:	<u> </u>	
	(Florida street odd)	(ess)
New Registered Office Address:		
(City)		_, Florida (Zip Code)
rC iity		except Citions y
New Registered Agent's Signature, if changing Registered Agent:	. t	ue at the maritian
I hereby accept the appointment as registered agent. I am familiar with a	па ассері іне овидано	ns 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 De V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add			
Remove		,	
2) Change Add			
Remove 3) Remove	******		
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet	ng additional Art ets, if necessary).	icles, enter change(s) here: (Be specific)	
Article IV, Purpose, is h	ereby amended to	add the following subsection:	
k. To provide affordable	e housing.		

The date of each amendment(s) adoption:
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 the 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 members and the number of votes east for the amendment(s) was/were sufficient for approval.

•

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 (October 30, 2024)		
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)		
Elena Norman		
(Typed or printed name of person signing)		
Chairman of the Board		
(Title of person signing)		