## N/600000 4072

| (Requestor's Name)                      |
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| (Address)                               |
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| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Business Chury Name)                   |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



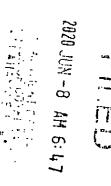
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## COVER LETTER

TO: Amendment Section Division of Corporations

| CAMP GEAR INC  AME OF CORPORATION:   |
|--|
| N16000004072   |
| OCUMENT NUMBER:  |
| he enclosed Articles of Amendment and fee are submitted for filling.   |
| lease return all correspondence concerning this matter to the following:   |
| OSHUA FARBER   |
| (Name of Contact Person)   |
|  |
| (Firm/ Company)  |
| 411 SW BRANCH TER  |
| (Address)  |
| PALM CITY, FL 34990  |
| (City/ State and Zip Code)   |
| OSH@FARBERREALTY.COM   |
| E-mail address: (to be used for future annual report notification)   |
| or further information concerning this matter, please call:  |
| OSHUA FARBER 561 722-3309  |
| (Name of Contact Person) (Area Code) (Daytime Telephone Number)  |
| nclosed is a check for the following amount made payable to the Florida Department of State:   |
| ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status  Certificate of Status (Additional copy is enclosed)  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

CAMP GEAT INC

| Name of Corporation as currently filed with the Flo<br>N16000004072  | orida Dept. of State)   |                                    |
|--|---|------------------------------------|
|  | Number of Corporation (if known)  |                                    |
|  | Statutes, this Florida Not For Profit Corporation adop                  | ts the following                   |
| A. If amending name, enter the new name of the cor  @HOME INC.   | rporation:  |                                    |
|  | orporation" or "incorporated" or the abbreviation "Co                   | The new                            |
| Company" or "Co." may not be used in the name.   | rportaion of memperated of metamoretation co-                           | , p. 0. 111C.                      |
| B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADD</u>   |   |                                    |
|  |   |                                    |
|  |   |                                    |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX  | ú)  |                                    |
|  |   |                                    |
|  |   |                                    |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered of New Registered Agent:  |   |                                    |
| Name by New Acquire of Manne by New Acquire and Manne by New Acquire an |   | _                                  |
| <del>-</del>   | (Florida street address)  |                                    |
| New Registered Office Address:   |   |                                    |
|  | , Florida   |                                    |
|  | (City) (Zip Cod   | e)                                 |
| New Registered Agent's Signature, if changing Regi-<br>hereby accept the appointment as registered agent. I  | stered Agent:  am familiar with and accept the obligations of the posi- | 2020 JUN                           |
|  | Signature of New Registered Agent, if changing                          | 67% <b>-</b><br>17.32 <b>- 0</b> 0 |
|  | .y  | AH 6:                              |

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  | <u>PT</u> <u>V</u> <u>SV</u> | John Do<br>Mike Jo<br>Sally S | ones                                       |         |
|------------------------------------|------------------------------|-------------------------------|--|---------|
| Type of Action<br>(Check One)      | <u>Title</u>                 |                               | <u>Name</u>                                | Address |
| 1) Change Add                      |                              | _                             |  |         |
| Remove                             |                              |                               |  |         |
| 2) Change Add                      |                              | _                             |  |         |
| Remove 3 ) Change Add Remove       |                              | _                             |  |         |
| 4) Change Add                      |                              | _                             | <del></del>                                |         |
| Remove                             |                              |                               |  |         |
| 5) Change Add                      |                              | _                             | <del></del>                                |         |
| Remove                             |                              |                               |  |         |
| 6) Change Add                      |                              | _                             |  |         |
| Remove                             |                              |                               |  |         |
| E. If amending or additional sheet |                              |                               | icles, enter change(s) here: (Be specific) |         |
|                                    |                              |                               |  |         |
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|  |                     |                   |                   |                    |                           |
| The date of each amendment(s) adopti           | 6/1/2020            |                   |                   |                    | , if other than th        |
|  |                     |                   |                   |                    |                           |
|  | dila                |                   |                   |                    |                           |
| Effective date <u>if applicable</u> :          | C/1/20              | 0.1               | t                 | 1                  |                           |
|  | (no more than 90    | t days after ame  | nament file dati  | e)                 |                           |
| Note: If the date inserted in this block d     | oes not meet the ap | oplicable statuto | ry filing require | ments, this date w | rill not be listed as the |

Adoption of Amendment(s)

(<u>CHECK ONE</u>)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

| dopted by the bo | ard of directors.  |
|------------------|--|
|                  | 6/1/2020   |
| Dated            |  |
|                  |  |
| 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 tiduciary by that fiduciary) |
|                  | JOSHUA FARBER  |
|                  | (Typed or printed name of person signing)  |
|                  | EXECUTIVE CHAIRMAN   |
|                  | (Title of person signing)  |

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were