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| Special Instructions to Fil | ing Officer: | |
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COVER LETTER

| TO: Amendment Section Division of Corporations |
|--|
| NAME OF CORPORATION: Lighthouse Dragons, Inc. |
| DOCUMENT NUMBER: N1700000682 |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Sandra Bolin |
| (Name of Contact Person) |
| Lighthouse Dragons, Inc. |
| (Firm/ Company) |
| 5500 Military Trail, Suite 22-206 |
| Jupiter, FL 33458 (City/ State and Zip Code) |
| |
| lighthousedragons @ gmail.com |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Sandra Bolin at (561) 310-1666 (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 \$\subseteq \$43.75 Filing Fee & Status Certificate of Status (Additional copy is enclosed) \$\subseteq \$35 Filing Fee & Status 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

Enclosed)

Articles of Amendment

to
Articles of Incorporation

| A TI COLLEGE | of 2021. |
|--|---|
| Lighthou | Se Dragons, Inc. APR SO pt. of State) 000682 |
| Name of Corporation as currently filed with the Florida De | pt. of State) |
| N 17000 | 000682 |
| the state of the s | of Corporation (if known) |
| Pursuant to the provisions of section 617.1006, Florida Statutes, amendment(s) to its Articles of Incorporation: | this Florida Not For Profit Corporation adopts the following |
| A. If amending name, enter the new name of the corporatio | <u>n:</u> |
| N/A | The new |
| name must be distinguishable and contain the word "corporation "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | West Palm Beach, FL |
| _ | 33417 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | N/A |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad | |
| Name of New Registered Agent: Jo | hn T. Butler |
| |) 4 Via Catalunha (Florida street address) |
| New Registered Office Address: | |
| | Typiter Florida 33458 |
| | (City) (Zip Code) |
| New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fame | iliar with and accept the obligations of the position. Instante 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: \underline{X} Change \underline{X} Remove \underline{X} Add | PT John D V Mike J SV Sally S | ones | |
|--|-------------------------------|---|--|
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| 1) Change Add | PD | Elizabeth A. Burden | 5500 Military Tr., Suite 22-206 |
| Remove 2) Change Add | <u>5D</u> | Karen Crea | Jupiter, FL 33458 5500 Military Tr., Suite 22-206 |
| Remove 3) Change Add Remove | D | Heidi Kirk | Jupiter, FL 33458 5500 military Tr. Suite 22.200 Jupiter, FL 33458 |
| 4) Change Add | <u>D</u> | John T. Butler | 5500 Military Tr., Suite 22-200 |
| Remove 5)ChangeAddRemove | [Sand | va Bolin remains same | Jupiter, FL 33458 |
| 6) Change Add | | | |
| Remove E. If amending or addir (attach additional shee | | icles, enter change(s) here: (Be specific) | |
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| The date of each amendment(s) adoptio | N/A | :C - 4b 4b 4b - |
| date this document was signed. | 4, | if other than the |
| _ | N 1 / A | |
| Effective date if applicable: | N/A | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block doe document's effective date on the Department | es not meet the applicable statutory filing requirements, this date will not ent of State's records. | be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were adopted was/were sufficient for approval. | by the members and the number of votes cast for the amendment(s) | |

. . .