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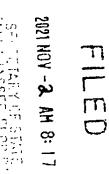
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A. RAMSEY NOV 1 6 2021

## COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: SOC	icty- First
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitte	d for filing.
Please return all correspondence concerning this matter to	the following:
Denise M.	me of Contact Person)
	(Firm Company)
4265 nw 6	(Address)
	on, Horida 33490
(City	y/ State and Zip Code)
denies confe	future annual report notification)
For further information concerning this matter, please call:	
	at 561. 951. 9781 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payab	le to the Florida Department of State:
Certificate of Status C	43.75 Filing Fee & S52.50 Filing Fee ertified Copy Certificate of Status Additional copy is nelosed) (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

FILED

Social	y - Jire	+ COCASPAY 71 H	&: 17
(Name of Corporat	on as currently filed	with the Florida Dept. of State) y 35	\$ 77
		1946 THE SHIPSEELE	i dasi -
(Docur	nent Number of Corpo	ration (if known)	
Pursuant to the provisions of section 607,1006, Florid its Articles of Incorporation:	a Statutes, this <i>Florida</i>	Profit Corporation adopts the following	2 amendment(s) to
A. If amending name, enter the new name of the co	orporation:		
			The new
name must be distinguishable and contain the word "c "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbre	" or "Co". A profes	v." or "incorporated" or the abbreviationsional corporation name must contain	n "Corp.," i the word
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADI</u>	<u> </u>		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>		
D. If amending the registered agent and/or register new registered agent and/or the new registered  Name of New Registered Agent		Florida, enter the name of the	
	tFlorida street addre	(88)	
New Registered Office Address:		, Florida	<del></del>
	(City)	tZip C	ode)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and	accept the obligations of the position.	
Signa	ture of New Registered	1 Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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: <u>X</u> Change	PT	John D	(re		
X Remove	<u>V</u>	Mike Jo			
X Add	$\underline{SV}$	Sally S	mith		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		Address
1) Change	<u>S</u> [	2	Ashley	Berrie	
Add					2240 SEBTH St. Pompano Beach
_X_ Remove					
2) Change		_		<del></del>	升. 33052
Add					
Remove 3 ) Change		_			
Add					
Remove					
4) Change		_		<del></del>	
Add					
Remove					
5) Change	-				
Add					
Remove					
6) Change		_			
Add					
Remove					

If an amendment provides for an exchange, reclassification, or cancellation of issued shares provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	
provisions for implementing the amendment if not contained in the amendment itself:	
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provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	<b>L</b>

and the second second

The date of each amendment(s) ado date this document was signed.	ption: 10/27/2021	, if other than the
Effective date <u>if applicable:</u>	10/27/2021	
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicable statutory filing requirements, this artment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of votes east for the amendmeetent for approval.	ent(s)
☐ The amendment(s) was/were appromust be separately provided for ea	ved by the shareholders through voting groups. The following statistic voting group entitled to vote separately on the amendment(s):	tement
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	;"	
	(voting group)	
Dated 10	/27/2021	
	Dimes man	
selected, I	etor, president or other officer – if directors or officers have not be by an incorporator – if in the hands of a receiver, trustee, or other offiduciary by that fiduciary)	en ourt
	Denise M. Chfo	
	(Typed or printed name of person signing)	
<u> 1</u>	Executive Director/1	President/