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COVER LETTER

TO: Amendment Section Division of Corporations

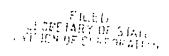
Tallahassee, FL 32314

NAME OF CORPORATION: PLANTATION CAM	PERS, INC		
N22000004129 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submi	itted for filing.		
Please return all correspondence concerning this matter	to the following:		
JOSEPH ZOWNOREGA			
(3	Name of Contact Po	erson)	
	(Firm/ Company	·)	
2900 BANYAN STREET #605			
	(Address)		- "
FORT LAUDERDALE, FL 33316			
((City/ State and Zip	Code)	
JZOWNOREGA@GMAIL.COM			
E-mail address: (to be used I	or future annual rep	ort notification	n)
For further information concerning this matter, please co	all:		
JOSEPH ZOWNOREGA	at	954	296-8300
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida I	Department of	State:
■ \$35 Filing Fee	3843.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	9 Filing Fee icate of Status ied Copy tional Copy is used)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	An Die	eet Address nendment Sectivision of Corpo e Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



2022 MAY -2 AM 10: 17

PLANTATION CAMPERS, INC

(Name of Corporation as currently filed with the Fl	orida Dept, of State)	
N22000004129		
(Document	Number of Corporation (f known)
Pursuant to the provisions of section 617.1006. Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not	For Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorpora	The new sted" or the abbreviation "Corp." or "Inc "
B. Enter new principal office address, if applicable:	•	
(Principal office address MUST BE A STREET ADD		
		
C. Enter new mailing address, if applicable:	v.	
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>	-
	 	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		da, enter the name of the
Name of New Registered Agent:		
		,
		(Florida street address)
New Registered Office Address:		
		, Florida (Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi I hereby accept the appointment as registered agent. I		ept the obligations of the position.
	Signature of New Res	gistered 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 V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>S</u>	BRANDYN LORENZ	2900 BANYAN STREET #605 FORT LAUDERDALE, FL 33316
Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add	- <u>-</u>	-	
E. If amending or adding (attach additional sheet)		onal Articles, enter change(s) here: ssary). (Be specific)	
		<u>-</u>	
			
 			

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	04/28/2022
The date of each amendment(s) adoption date this document was signed.	04/28/2022
nee at the second	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	bes not meet the applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopte was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)

•

Dated	04/28/2022
Signatu	c kas/1
	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)
	JOSEPH ZOWNOREGA
	JOSEPH ZOWNOREGA (Typed or printed name of person signing)

(Title of person signing)

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

A CHETARY OF STATE