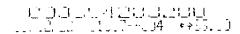
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

Ui NAME OF CORPORATION:	nite Lehigh, Inc			
	0006985			·
DOCUMENT NUMBER:				
The enclosed Articles of Amendme	nt and fee are submitted	for filing.		
Please return all correspondence co	ncerning this matter to th	e following:		
Alain Capucci				
	(Namo	of Contact Perso	nn)	
Unite Lehigh, Inc				
	(F	irm/ Company)		
P.O.Box 1021				
·		(Address)		· · · · · · · · · · · · · · · · · · ·
Lehigh Acres Fl 33970				
	(City/	State and Zip Co	ie)	
capuccil@yahoo.com				
E-mail a	ddress: (to be used for fu	ture annual repor	notification	)
For further information concerning	this matter, please call:			
Alain Capucci		2.1 at	19	220-8156
(Name	of Contact Person)		rea Code)	(Daytime Telephone Number)
Enclosed is a check for the following	g amount made payable	to the Florida Dep	partment of S	State:
■ \$35 Filing Fee □\$43 Cer	tificate of Status Cert (Add	75 Filing Fee & ified Copy ditional copy is losed)	Certific Certific	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address		Street	Address	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

Unite Lehigh, Inc		
(Name of Corporation as currently filed with the	Florida Dept. of State)	
N22000006985		1
(Docume	nt Number of Corporation (if k	nown)
Pursuant to the provisions of section 617,1006, Floridamendment(s) to its Articles of Incorporation:	da Statutes, this <i>Florida Not Fe</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	**
N/A		TI
name must be distinguishable and contain the word "Company" or "Co," may not be used in the name.	"corporation" or "incorporated	The new l" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicab	N/A	
(Principal office address MUST BE A STREET AD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B)	<i>ox</i> ) N/A	
	<del></del>	
D. If amending the registered agent and/or register	ered office address in Florida	enter the name of the
new registered agent and/or the new registered		
Name of New Registered Agent:	₹/A	
_		
New Registered Office Address:	(F)	lorida street address)
}	N/A	. Florida
<del>-</del>	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re	aistored Agents	
I hereby accept the appointment as registered agent.		the obligations of the position.
-		<i>→</i>
	11/5	
	Signature of New Regist	ered 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 Do           V         Mike Jo           SV         Sally Sr	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>P</u>	Tvler Woodby	936 EISENHOWER BLVD LEHIGH ACRES, FL 33974
' xxxxx Remove			
2) Change Add	TR	John Hamilton	2802 E.5TH STREET LEHIGH ACRES, FL 33936
XXXXX   Remove	<u>TR</u>	Dereck Felder	18117 Horizon View Blvd  Lehigh Acres FL 33972
4) xxxx Change Add	<u>P</u>	Barrion Staples	2003 E. 7TH STREET Lehigh Acres FL 33936
Remove			
5) xxxx Change Add	VP	Alain Capucci	1119 Poinsettia Ave Lehigh Acres FL 33972
Remove			
6) Change Add	<u>D</u>	Calvin Mitchell	1250 business wav Lehigh Acres FL 33936
Remove			
(attach additional shee		cles, enter change(s) here: (Be specific)	
<u>N/A</u>			

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		<del></del>
		······
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The date of each amendmentate this document was signed	(s) adoption:	, if other than the
Effective date <u>if applicable</u> :	08/22/2022	
meetive date <u>it appregante</u> :	(no more than 90 days after amendment file do	nte)
John 16 the data imported in th	is black does not meet the analicable statutory filing requi	

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 cast for the amendment(s) was/were sufficient for approval.

	08/22/2022
Dated	
	(2/
Signature	4/1-55
	(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)
	Alain CAfucci
	(Typed or printed name of person signing)
	V.P.