N22000011570

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Local Hurricane Con	poration		
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subn	nitted for filing.		
Please return all correspondence concerning this matter	er to the following:		
Alainah Hacker			
	(Name of Contact Per	son)	
Local Hurricane Corporation			
	(Firm/ Company))	
4230 5th AVE NW			
	(Address)	<u>-</u>	
Naples, Florida 34119-1508			
	(City/ State and Zip C	Code)	
alainah@localhurricane.com			
E-mail address: (to be used	for future annual rep	ort notification	<u> </u>
For further information concerning this matter, please	call:		
Alainah Hacker	at	239	8774292
(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida I	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certif Certif	D Filing Fee ficate of Status fied Copy tional Copy is fied)
Mailing Address Amendment Section Division of Corporations	An	eet Address nendment Sect vision of Corpo	

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

FILED

Local Hurricane Corporation

2022 OCT 28 AM II: 57

Excarramente corporation					
Name of Corporation as currently filed with the Flo	orida Dept. of State)	SECRETARY OF STATE			
N22000011570	SECRETARY OF STATE TALLAHASSEE, FL				
(Document	Number of Corporation (if k	nown)			
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fe	or Profit Corporation adopts the following			
A. If amending name, enter the new name of the co	rporation:				
Not Applicable		The new			
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporate	d" or the abbreviation "Corp." or "Inc."			
	Not Applicable	Not Applicable			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD	<u>RESS</u>)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	Not Applicable				
D. If amending the registered agent and/or register new registered agent and/or the new registered of the new	ed office address in Florida	a, enter the name of the			
N	ot Applicable				
Name of New Registered Agent:					
_		Florida street address)			
New Registered Office Address:					
No	ot Applicable	, Florida Not Applicable			
	(City)	(Zip Code)			
and the second s	intered Agents				
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	Istered Agent. Lam familiar with and accep	ot the obligations of the position.			
I her boy decept the appointment to regard as again.	,	-			

Signature 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 <math>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>V</u> <u>Mik</u>	<u>n Doe</u> e Jones y Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
Change X Add	PSD	Alainah M Hacker	4230 5th AVE NW Naples, Florida 34119-1508
Remove 2) X Change Add	VD_	Randall L Hacker	4230 5th AVE NW Naples, Florida 34119-1508
Remove 3) X Change Add Remove	TD	Angela S Hacker	4230 5th AVE NW Naples, Florida 34119-1508
4) Change Add	<u>D</u>	Kamryn L Hacker	4230 5th AVE NW Naples, Florida 34119-1508
X Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or ad (attach additional sales) Not Applicable		Articles, enter change(s) here: y). (Be specific)	

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The date of each amendment	(s) adoption: _					_, if other than the
date this document was signed.	10/25/2022					
Effective date if applicable:		more than 90 day	s after amendm	ent file date)		
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)	Œ	CHECK ONE)				
☐ The amendment(s) was/w	ere adopted by	the members and	the number of v	otes cast for the a	mendment(s)	
was/were sufficient for an	oprovai.					

adopted by the boa	ard of directors.
Dated	10/25/2022
Signature	againsh M. Hacks
olginitude (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)
	Alainah M Hacker
	(Typed or printed name of person signing)
	President, Secretary, Director
	(Title of person signing)

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

2022 OCT 28 AM II: 57 SECRETARY OF STATE