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C. BRUMBLEY
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION:		SSUCIALIC	лх. так
DOCUMENT NUM	IBER:			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	tter to the following:		
	Luis Lopez			RECEIVED
		Name of Contact Perso	n	IL CELA ED
	JANE APARTMENTS CON			2022 APR -5 AM 11: 42
		Firm/ Company		LULL C- NUMBER
	3300 NW 110TH ST			SECRETARIA FIGTATE TALLAHASSEE, FL
		Address		IALLANA SOLE, FL
	MIAMI, FL 33167			
		City/ State and Zip Cod	e	
	gohubproperty@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification	<u>)</u>
For further informat	ion concerning this matter, pleas		219-454	14
Name	e of Contact Person	at () ide & Davrir	ne Telenhone Number
	for the following amount made			
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certific Certific	Filing Fee rate of Status rd Copy onal Copy osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amenc Divisio The C	Address Iment Section of Corporentre of Ta	ations Hahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment

to

to
Articles of Incorporation
of

Jane Apartments Condonie	NIWW Association, Inc.
(Name of Corporation as currently filed with the Florida I	
N 9400000 39	
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:
	The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS))
	. 2
	022
C. Enter new mailing address, if applicable:	APR
(Mailing address MAY BE A POST OFFICE BOX)	
	一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一
	- ω
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
new registered agent and/or the new registered office a	dul Ess.
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	(City), Florida
	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent:
rneren, uccepi ine appoinment us registereu ugent. Tuniya	The state of the position
	Vixu/
Si	grature 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: X Change X Remove X Add	PT John D V Mike Je SV Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>P. </u>	huis lopz	3300 NW 1107# St Man, F(33167
Remove	,	0	
2) Change Add	ATIS	So Hub Group Holdings Corp	3300 NW 110THST MIAMI, FC 33167
Remove Change Add Remove			
4) Change Add			
Remove			
5) Change Add		· · · · · · · · · · · · · · · · · · ·	
Remove			
δ) Change Add			
Remove			
E. If amending or additional sheet	ng additional Art	icles, enter change(s) here: (Be specific)	
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The date of each amendment(s) adoption:		.		, if other than the
date this document was signed.				
Effective date if applicable: (no more than				
(no more that	i 90 days after amend	iment file date)		

<u>Note:</u> 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.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated $\frac{3/(8/22)}{}$
Signature
(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 flands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Luis LOPEZ
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)