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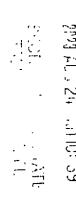
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Charlons Projecty Junes Hospina Inc
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
(Firm/ Company)
5878 Chaps Drive (Address) Lalerbach, Fl. 33812 (City/ State and Zip Code)
Island, FL 33812
(City/ State and Zip Code) Charlon Phones Phones (Company) E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at 863 -430 -3824 33 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
(Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for the following amount made payable to the Florida Department of State: Enclosed is a check for t

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 of

(Name of Corporation as currently filed with the	Florida Dept. of State)		
(Docume	nt Number of Corporation (if known)		_
Pursuant to the provisions of section 617.1006, Floridamendment(s) to its Articles of Incorporation:	da Statutes, this <i>Florida Not For Profit Corporation</i> adopts th	ne follov	ving
A. If amending name, enter the new name of the	corporation:		
		The i	acw
"Company" or "Co." may not be used in the name.	"corporation" or "incorporated" or the abbreviation "Corp."	or "In	<i>t</i>
B. Enter new principal office address, if applicab (Principal office address <u>MUST BE A STREET AD</u>			
	· · · · · · · · · · · · · · · · · · ·	-	
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE B</u>	<u>OX</u>)		—
		_	
D. If amending the registered agent and/or regist new registered agent and/or the new registered	ered office address in Florida, enter the name of the doffice address:		
Name of New Registered Agent:			
-	(Florida street address)		
<u>New Registered Office Address:</u>		·)	6643
-	City) , Florida, Florida	- }- -	1
New Registered Agent's Signature, if changing Re		•	2
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position		<u> </u>
_			-=:
	Signature of New Registered Agent, if changing		تَعَ

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.

Trinc borres, 7 day re.	nore, una sanj smin	, ST ds un Add.	1
Example: X Change X Remove X Add	PT John I V Mike . SV Sally S	lones //	/
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change Add	Vecretry & Therener	Christopher Baldwin	6075 Charles D. 1266/201, FL 338/2
Remove 2) Change Add	Secretary & Theosore	Falmo Hiplan	6061 Cherlons Dr. Lakeland, FL 33812
Remove 3) Remove			
4) Change Add			
Remove 5) Change Add			960/ 203
Remove 6) Change Add			
E. If amending or a (attach additional	dding additional Art sheets, if necessary).	icles, enter change(s) here: (Be specific)	- <u>></u> &

	908 NUE 24
	1116: 39 1116: 39
The date of each amendment(s) adoption: May 1, 2023 date this document was signed.	if other than the
Effective date if applicable: May 1 2523 (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	s date will not be listed as the
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 July 4, 2023				
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 hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)				
L JOHAN JONSSON				
(Typed or printed name of person signing)				
PRESIDENT, BOARD OF DIRECTORS				
(Title of person signing)				