POWOWO 77489

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Laventure & Assoc	riates, Inc.		 -
	ER: P00000077489			-
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	Richard C. Laventure			
•		Name of Contact Person	1	
	Laventure & Associates, Inc.			
•		Firm/ Company		
	2552 Peters Road Suite D			
		Address		
	Fort Pierce, Florida 34945			
		City/ State and Zip Cod	e	
agter	r@msn.com			
	-	sed for future annual report	notification)	-
	is man addressed to the de-	war	,	
For further information	concerning this matter, pleas	se call:		
Richard Laventure		at (3986430	
Name c	of Contact Person	Area Co	de & Daytime Telephone Nu	ımber
Enclosed is a check for	the following amount made [payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amenc Divisic Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

Articles of Amendment to Articles of Incorporation of

N 1	- 6	

(Name of Corporation as cu	rrently filed with the Florida Dept. of State)	
(Document Nur	nber of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statute its Articles of Incorporation:	s, this <i>Florida Profit Corporation</i> adopts the follow	ving amendment
A. If amending name, enter the new name of the corporati	on:	
		Thenew
name must be distinguishable and contain the word "corp "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc, word "chartered," "professional association," or the abbrevi	" or "Co". A professional corporation name mu	abbreviation st contain the
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
	- 	
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office a		
new registered agent and/or the new registered office a	udress.	
Name of New Registered Agent		
(Flo	rida street address)	
New Registered Office Address:	, Florida	
	(City) (Z.	îp Code)
Name Danierana I Arant's Cinnatura if abanding Danierana	Agont	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far		n.
		
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, 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 = C Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each of 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. The 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 Cha Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: <u>X</u> Change	<u> 1'1</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	V	Kaitlyn G. Laventure	2552 Peters Road Suite D	
X Add			Fort Pierce, Florida 34945	
Remove				
2) Change				
Add				
Remove				
3)Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

If amending or adding addition (Attach additional sheets, if nec	essary). (Be specific)			
		 		
				<u> </u>
				
		 -		
	<u> </u>			
				···
				
				
			·····	
				
				<u> </u>
				····
				
If an amendment provides for	an exchange, reclassif	ication, or cancellat	ion of issued shares,	
provisions for implementing (if not applicable, indicate		contained in the ame	endment itself:	
(у ног аррасионе, такаа	: IVA)			
				
				

The date of each amendment(s) adoption:	, if other tha
date this document was signed.	
Effective date <u>if applicable</u> :	
(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 dadocument's effective date on the Department of State's records.	te will not be listed a
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s by the shareholders was/were sufficient for approval.	;)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statements that the separately provided for each voting group entitled to vote separately on the amendment(s):	ent —
"The number of votes cast for the amendment(s) was/were sufficient for approval	
hy" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required.	r
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 6/13/19	
Signature Buhal Control of Other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other cour appointed fiduciary by that fiduciary)	t
Richard C. Laventure	
(Typed or printed name of person signing)	
President	
(Title of person signing)	