## P00000085370

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: ABI Arbor, Inc.				
DOCUMENT NUV	IBER: P00000085370				
	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this mat	tter to the following:			
	Frank M. Cantanno				
		Name of Contact Perso	n		
	ABI Arbor, Inc				
		Firm/ Company			
	25 Pine Cone Drive, Ste 4			_	
		Address			
	Palm Coast, FL 32164				
	•	City/ State and Zip Cod	e		
	rballer@arborstaff.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
Colleen Silano		at (386	264-6869		
Name	Name of Contact Person at ( Area Code & Daytime Telephone Number		r		
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	SECRETAM) OF ST	2023 APR 12
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		A OF STATE ASSEE, FL	2023 APR 12 FM 1:58

Taflahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FL S8	ABI Arbor, Inc.					
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:  A. [Hamending name, enter the new name of the corporation:  N/A The new manus be distinguishable and contain the word "corporation." "compans," or "incorporated" or the abbreviation "Corp.," "Inc." or Co.," or the designation "Corp.," "Inc." or "Co". A professional corporation name must contain the word "contain the word "chartered." "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MEST BE A STREET ADDRESS)  Palm Coast, FL 32135  D. Hamending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  25 Pinc Cone Drive, Ste 4  Palm Coast, FL 32135  D. Hamending the registered agent and/or registered office address:  Name of New Registered Agent  25 Pinc Cone Drive, Ste 4  Palm Coast, FL 32135  Polic Cone Drive, Ste 4  Polic Coast, FL 32135  Polic	(Name of	f Corporation as current	ly filed with the Florida Dept. of State)			
Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Prafit Corporation adopts the following amendment(s) to its Articles of Incorporation:  A. Hamending name, enter the new name of the corporation:  N/A  The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or Co., or the designation "Corp.," or The order of the subreviation "P.A."  Palm Coast, FL 32135  D. Hamending the registered agent and/or the new registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent and/or the new registered office address:  New Registered Agent's Signature, if changing Registered Agent;  Or Change Corp. The corp. The company of the position, or the position of the position, or the de	P00000085370					
A. If amending name, enter the new name of the corporation:  N/A  The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.", A professional corporation name must contain the word "chartered." "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAYBE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  See Registered Office Address:  New Registered Office Address:  Palm Coast  (City)  New Registered Agent's Signature, if changing Registered Agent;  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position, Fig. 3. See See See See See See See See See Se		(Document Number o	of Corporation (if known)			
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "lnc.," or "Co.," or the designation "Corp.," "lnc.," or "Co.," A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  8. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. Hamending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:    Name of New Registered Agent   Florida		006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to			
name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp., "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered." "professional association." or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MEST BE A STREET ADDRESS)  B. Enter new mailing address MEST BE A STREET ADDRESS)  C. Enter new mailing address MAY BE A POST OFFICE BOX)  Pollow 352530  Palm Coast, FL 32135  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:    Name of New Registered Agent   Frank Cantanno     25 Pine Cone Dr. STE 4	A. If amending name, enter the new na	me of the corporation:				
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "hec," or "Co". A professional corporation name must contain the word "chartered," "professional association or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Urincipal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address MAYBE A POST OFFICE BOX)  Pol Box 352530  Palm Coast, FL 32135  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:    Name of New Registered Agent   Frank Cantanno	N/A		The new			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS )  Palm Coast, FL 32164  PO Box 352530  Palm Coast, FL 32135  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:    Name of New Registered Agent   Frank Cantanno	"Inc.," or Co.," or the designation "Co	orp," "Inc," or "Co",	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word			
C. Enter new mailing address, if applicable: (Mailing address MAYBE A POST OFFICE BOX)  Palm Coast, FL 32164  PO Box 352530  Palm Coast, FL 32135  D. Hamending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:    Name of New Registered Agent   Florida	B. Enter new principal office address, if applicable:		25 Pine Cone Drive, Ste 4			
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:    Name of New Registered Agent   Frank Cantanno   25 Pine Cone Dr. STE 4			Palm Coast, FL 32164			
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:    Name of New Registered Agent   Frank Cantanno   25 Pine Cone Dr. STE 4						
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Name of New Registered Agent    Sew Registered Office Address			Palm Coast, FL 32135			
Name of New Registered Agent  New Registered Office Address:    Palm Coast   Florida Street address						
New Registered Office Address:    Palm Coast   City   City			<u>u</u>			
New Registered Office Address:    Palm Coast   Palm Coast	Name of New Registered Agent					
New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. The second of the position of the position. The second of the position of the position of the position.		25 Pine Cone Dr. STE 4				
New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. The second of the position of the position. The second of the position of the position of the position.		tFlorida st	reet address)			
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New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. The second of the position of the position. The second of the position of the position of the position.	<u> </u>		(City) (Zip Coch)			
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FL S8						
FL S8	New Registered Agent's Signature, if ch	anging Registered Agent	uith and accent the obligations of the position III			
ga eli	Thereny accept the appointment as registe	rea agem. Tum jamma	" I'm und accept the binganous of the posmonary of			
		9 d	ATE 28			
Signature of New Registered Agent, if changing	<del></del> .	Signature of New F	Egistered Agent, if changing			

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 = ChiefExecutive 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	<u>PT</u>	John Doe	<u>:</u>	
X Remove	<u>V</u>	Mike Jon	ne <u>s</u>	
<u>X</u> Add	<u>sv</u>	Sally Sm	<u>ith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove 3 ) Change		<del>-</del>		
Add				
Remove				
4) Change				
Add				<u></u>
Remove				SECULET TAILS
5) Change		<del></del>		<b>デン _</b>
Add				· · · · · · · · · · · · · · · · · · ·
Remove				UF STAT
6) Change				TATE
Add				
Remove				

. <u>If amending or adding</u> (Attach <i>additional sheets</i>	additional Articles,	enter change(s)	here:		
	, g necessary r	specifics			
#/A	<u></u>				
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. If an amendment prov	ides for an exchang	e, reclassificatio	on, or cancellati	on of issued sha	res,
provisions for implen	nenting the amendm	<u>ent if not conta</u>	ined in the amo	<u>endment itself:</u>	
(if not applicable,	maicale MA)				
VA					
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Principle Address 03/07/2005, Reg Agent 03/19/2001  The date of each amondment(c) adoption:  (The date of each amondment(c) adoption:  (The date of each amondment(c) adoption:
The date of each amendment(s) adoption:
Effective date if applicable:
(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 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 incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ 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 statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by N/A
(voting group)
Dated April 5, 2023
Signature (By a director, president or other officer – if directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Frank Cantanno
(Typed or printed name of person signing)
President
(Title of person signing)

2023 APR 12 PM 1: 58 SECRETARY OF STATE TALLAHASSEE, FL