P00000 118009

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FILED
2024 AUG -7 PH 2: 42
SECHETARY OF STATI



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	ACTIVE INVEST SOUTH CORPORATION
DOCUMENT NUMBER: P	00000118009
The enclosed Articles of Amendme	nt and fee are submitted for filing.
Please return all correspondence co	neerning this matter to the following:
	JEAN MANSSON Name of Contact Person
	isame of Confact Leison
	Firm/ Company
	5005 SARASOTA CT
	Address
	City/ State and Zip Code
	City/ State and Zip Code
JEF	address: (to be used for future annual report notification)
E-mail	address: (to be used for future annual report notification)
For further information concerning	this matter, please call:
LARRY SMITH	ar 239 , 482-3573
Name of Contact Pe	at (239) 482-3573 Area Code & Daytime Telephone Number
Enclosed is a check for the following	g amount made payable to the Florida Department of State:
	5 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee cate of Status Certified Copy (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Sect Division of Corpo P.O. Box 6327 Tallahassee, FL 3	orations Division of Corporations The Centre of Tallahassee

Articles of Amendment

to

Articles of Incorporation

Articles of Inco	rporation F11 5
	PORATION 2024 ALED
ACTIVE INVEST SOUTH COR	filed with the Florida Dept Of State)
P00000 118009	SEURFTAR FA 2: 42
	Corporation (it known ALLAHASSE STATE
Pursuant to the provisions of section 607.1006 , Florida Statutes, this F_{ij} its Articles of Incorporation:	Iorida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	··
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	The new ompany," or "incorporated" or the abbreviation "Corp" professional corporation name must contain the word
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NIA
	10 (11
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	NIA
D. If amending the registered agent and/or registered office addre	es in Florida, antar the game of the
new registered agent and/or the new registered office address:	ss in Ciorida, enter the name of the
Name of New Registered Agent	NIA
tFlorida stree	t uddress)
New Registered Office Address:	. Florida
	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar wi	th and accept the obligations of the position.
N	A gistered Agent, if changing
Signature of New Reg	distored Agent, if changing

Check if applicable

1.

☐ 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)

Example:

Please note the officer/director title by the first letter of the office tale:

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.

X Change	<u>PT</u> <u>Jo</u>	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
<u>X</u> Add	<u>SV</u> <u>Sa</u>	ully Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP	ANDERS MMSSON	573 SW 53RD TERRACE
Add			CAPE CORAL, FL 33914
X Remove			
2) Change	<u> </u>	MARIE MANSSON	GOLNM 39TH AVE
_ X _ Add			CAPE CORAL, FL 33993
Remove 3) Change	VP	JONAS MANSSON	
X Add			6741 LIVING 5TONE WOODS LN
Remove			NAPLES, FL 34109
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	•		
Add			
Remove			

Attach additional sheets, if necessary). the specific) At A A If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate NA)						
f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)						
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The date of each amendment(s) ado	ption: JULY	30,2054 	, if other than th
date this document was signed.			
Effective date <u>if applicable</u> :	JULY	30, 2024 than 90 days after amendment file day	
	(no more	than 90 days after amendment file da.	(c)
Note: If the date inserted in this blo locument's effective date on the Department.	ck does not meet the irtment of State's rec	applicable statutory filing requirence ords.	ents, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE	2)	
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporate	ors, or board of directors without share	cholder action and shareholder
The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholde icient for approval.	rs. The number of votes east for the a	mendment(s)
The amendment(s) was/were appromist he separately provided for ea	wed by the sharehold uch voting group enti	ers through voting groups. The follow tled to vote separately on the amendm	ving statement entis);
"The number of votes east fo	r the amendment(s) v	vas/were sufficient for approval	
by			
-	tvoting group)		
Dated71	30/24		
Signature		71160 T	
(By á dire	ctor, president or oth	er officer – if directors or officers hav	e not been
✓ selected,	by an incorporator -	if in the hands of a receiver, trustee, o	r other court
// appointeg	l'fiduciary by that fid	uciary)	
	JEAN (MANSSON	
		rinted name of person signing)	·
	PRESID	EUT	
	(Title of per	son signing)	