P03000026242

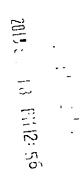
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I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPO	RATION: The Eire Compani	es, Inc.	
DOCUMENT NUM			
	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	Mark D. Spillane		
		Name of Contact Person	n
	The Eire Companies, Inc		
		Firm/ Company	
	2701 NW 2nd Ave. Suite 10	4	
		Address	
	Boca Raton, FL 33431		
		City/ State and Zip Cod	e
mark	@eirecos.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Thomas Arpei		at (⁵⁶¹	757-9066
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r 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)
<u>Mai</u>	iling Address	Street	Address
Amendment Section		Amendment Section	
Division of Corporations		Divisio	n of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

The Eire Companies, Inc.			
(Name of Corpo	ration as currently filed with	the Florida Dept. of State)	
P03000026242			
(Do	ocument Number of Corporation	on (if known)	
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this Florida Pro	ofit Corporation adopts the follow	ing amendment(s)
A. If amending name, enter the new name of th	ne corporation:		
			The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Co.,"	Corp, " "Inc," or "Co". A pr	any," or "incorporated" or the cofessional corporation name mus	abbreviation
word "chartered," "professional association," or	the abbreviation "P.A."		B
3. Enter new principal office address, if application	able:	•	<u></u>
Principal office address <u>MUST BE A STREET</u>	ADDRESS)		
			
			- F. 175: 25.
Enter new mailing address, if applicable:			72
(Mailing address MAY BE A POST OFFICE	ROX)		, , , , , , , , , , , , , , , , , , ,
			 ;
			<u> </u>
			
). If amending the registered agent and/or regi	stered office address in Flor	ida, enter the name of the	
new registered agent and/or the new register	red office address:		
Name of New Registered Agent			
			_
	(Florida street address)		_
	(rioriaa sireet adaress)		
New Registered Office Address:	<u> </u>	, Florida	
	(City)	(Zip	Code)
New Registered Office Address:	(City)		Code)
ew Registered Agent's Signature, if changing I	Registered Agent:		
hereby accept the appointment as registered agen	nt. I am familiar with and acc	ept the obligations of the position.	
-	•		
	ignature of New Registered As	pent 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	PT	John Doe	
X Remove	¥	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Thomas Arpei	2701 NW 2nd Ave. Suite 104
X Add			Boca Raton, FL 33431
Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		-	
Add			
Remove			
6) Change			
Add			
Remove			

. 3	icles, enter change(s) here: (Be specific)
· · · · · · · · · · · · · · · · · · ·	
f	
<u>provisions for implementing the amer</u>	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
<u>provisions for implementing the amer</u>	ange, reclassification, or cancellation of issued shares, adment If not contained in the amendment itself:
<u>provisions for implementing the amer</u>	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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<u>provisions for implementing the amer</u>	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
<u>provisions for implementing the amer</u>	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
<u>provisions for implementing the amer</u>	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:

	September 13, 2019	
The date of each amendment date this document was signed.	(s) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	September 13, 2019	
	(no more than 90 days after amendment file date)	A
Note: If the date inserted in the document's effective date on the	this block does not meet the applicable statutory filing requirements, this date the Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
☐ The amendment(s) was/wen must be separately provide	e approved by the shareholders through voting groups. The following statemen d for each voting group entitled to vote separately on the amendment(s):	t
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	e adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
9/13/20 Dated	019	
Signature		
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Thomas Arpei	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	