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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Safety Harbour In:	suranceme. Inc			
DOCUMENT NUMB	ER: PO3000028094				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corres	ondence concerning this ma	atter to the following:			
9	Carolyn Keiling				
	Name of Contact Person				
-	Firm/ Company				
<u>.</u>	2436 Ephraim Ave	····			
	C . M . El 22007	Address			
<u>_</u>	Fort Myers, FL 33907	City/ State and Zip Code	<u>.</u>		
<u>.</u>	ekeiling@yahoo.com E-mail address: (to be u	sed for future annual report	notification)		
For further information	concerning this matter, plea	se call:			
Carolyn Keiling		at (<u>239</u>) 410-4070		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	☐S43.75 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		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

Safety Harbour Insurance, Inc			
(Name of Corporation as current	tly filed with the Florida Dept. of State)		
PO3000028094			
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
Love and Light Glass, Inc	The new		
name must be distinguishable and contain the word "corporation," ' "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	'company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word		
B. Enter new principal office address, if applicable:	Love and Light Glass, Inc		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	2436 Ephraim Aye		
	Fort Myers, FL 33907		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Love and Light Glass, Inc		
	2436 Ephraim Ave		
	Fort Myers, FL 33907		
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres			
Name of New Registered Agent			
(Florida st	reet address)		
New Registered Office Address:	, Florida		
	(City) (Zip Code)		
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position. 🛮 🛬		
	021 J		
	[
Signature of New I	Registered Agent, if changing		
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	(e) FS		

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 = Trustec; 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:	F > ***		
X Change	PT	John Doe	
X Remove	\underline{Y}	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			
Add			
Remove			
2) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove 3) Change			-
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	***		
Add			
Remove			
6) Change		_	
Add			
Remove			

	ditional sheets.	, if necessary).	(Be specific)			
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an amer	idment provid	des for an exch	ange, reclassific	ation, or cancella	tion of issued shar	es.
<u>provision</u>	<u>is for impleme</u>	enting the ame	ndment if not co	ntained in the am	endment itself:	<u> </u>
	t applicable, ii	ndicate N/A)				
(if no						
(if no						
(if no						
(if no						
(if no						
(if no						
(if no						-
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The date of each amendment(s) adoption:	if other than the
date this document was signed.	
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 vidocument's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action a action was not required.	nd shareholder
☐ 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):	~2
"The number of votes cast for the amendment(s) was/were sufficient for approval	021
by	JUL
(voting group)	2021 JUL 12
	PH C.
Dated July 1, 2021	
Signature Oron	??
(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)	
appointed ridderary by that indiciary)	
Carolyn S Keiling	
(Typed or printed name of person signing)	
President	
(Title of person signing)	