P03000106836

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JUL 3 0 2021 A RAMSEY

COVER LETTER

Division of Corpor			•	
NAME OF CORPORA	ation: Har	ting Corp	oration	
DOCUMENT NUMBI	er: <u>P03000</u>	106836		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing,		Old address was
Please return all corresp	ondence concerning this ma	tter to the following:		2771-1 Smoke Hickey
New -> - address 6/20/2021	7225 Apol harting.a	Name of Contact Person Corporation Firm/ Company Bowspirit Address Jo Beach FL City/ State and Zip Code onette 3 @ gr sed for future annual report in	3357A nail. Com	3707 Sincke Hicky Lane Valriagi FL pte 33596
For further information	concerning this matter, pleas	se call:		
<u>Annette</u>	D. Hartin	g at (813 Area Code	817-34/6 & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depar	tment of State:	
\$35 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)	
Amer Divisi	ng Address adment Section ion of Corporations 30x 6327	Division	ddress nent Section of Corporations ntre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of A	mendment
to Articles of Inc	corneration
of of	corporation 2021 JUL 12 PM 12 ly filed with the Florida Dept. of State 15 (48) or
	ly filed with the Florida Dept. of State 14 (ABY OF STATE)
P03000106836	NOTE FORE
(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:	
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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Done bn C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Done bn Done bn Done bn Done bn C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	A professional corporation name must contain the word
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent	
New Registered Office Address: 7225 Bou Apollo Be	reel address) USpirit Place, Florida 33572 (City) (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	<u>t:</u>
Jerus I Signature of New K	Registered Agent, if changing
	\mathcal{U}

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)

Example:

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.

X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<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		PA	
Add			
Remove			

Attach <i>additional sh</i>	ing additional Art sects, if necessary).	(Be specific)				
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					<u>.</u>	
f an amendment p	rovides for an excl	hange, reclassific	cation, or cancell	ation of issued	shares,	
provisions for imp	lementing the ame ole, indicate N/A)	endment if not co	ontained in the a	mendment itsel	<u>f:</u>	
(if not applican	ne, indicate N/A)					
		c				

•

The date of each amendment(s) adoption: $(a/20/202)$, if other than the date this document was signed. Effective date if applicable: $(a/20/202)$ (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
Signature (By a director, president or other officer—vidirectors 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) Anne He (Typed or printed name of person signing) (Title of person signing)