P04 0000 28089

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COVER LETTER

TO: Amendment Section

Division of Corpor	rations		
NAME OF CORPOR	ation: EHO	a EtHIM	BY, LOSW, PA
DOCUMENT NUMB	er: <u>P040</u>	100028089	<u>'</u>
The enclosed Articles of	f Amendment and fee are su	abmitted for filing.	
Please return all corresp	ondence concerning this ma	atter to the following:	
-	E-mail address: (to be us	Name of Contact Person Name of Contact Person A Ethin Firm/ Company Execut Address A term/ City/ State and Zip Contact Seed for future annual report	Ger, Lery PA we wry #206 vo, FL 32082 ingeragnail.cm
46	concerning this matter, please Contact Person	a(<u>90</u>	4 373-4099 ode & Daytime Telephone Number
Enclosed is a check for \$35 Filing Fee	the following amount made \$43.75 Filing Fee & Certificate of Status		Dartment of State: \$\Bigsis \$\\$\$52.50 \text{ Filing Fee} \text{ Certificate of Status} \text{ Certified Copy} \text{ (Additional Copy}
Amen Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 nassee, FL 32314	Amen Divisi The C	is enclosed) Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	1 20 - 1 21 -
Etta Ettlin	ger, Cou, PA
(Name of Corporation as currently	filed with the Florida Dept. of State)
P04000	028089
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
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."	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Vater now and the address of an exact to	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	22 -
	ين ب
D. If amending the registered agent and/or registered office addre	ess in Florida enter the name of the
new registered agent and/or the new registered office address:	33 in Frontagenter the name of the
Name of New Registered Agent Same:	Bosanne P. Perrine, Esq.
change to:	240 CANAL BLVD, Suite 6 er address) Ponte Vede Beach, FL
Florida stre	er address) Ponte Veda Peach, FL
New Registered Office Address:	, Florida
(1)	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of the position.
	. , ,
Signature of New Reg	gistered Agent, if changing
Check if applicable	
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c	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 = 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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones	
_X Add	_ <u>sv</u>	Sally Si		
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add		_		
Remove				

Attach additional sheets, if necessary).	(Be specific)	
	<u> </u>	
an amendment provides for an exch provisions for implementing the ame	ange, reclassification, or cancel	llation of issued shares,
(if not applicable, indicate N/A)	oment is not contained in the	ancomen usen.
		· · · · · · · · · · · · · · · · · · ·
		

The date of each amendment(s) a date this document was signed.	doption:, if other than the
J	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this be document's effective date on the Do	block does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement
must be separately provided for "The number of votes cast	for the amendment(s) was/were sufficient for approval
must be separately provided for "The number of votes cast	for the amendment(s) was/were sufficient for approval
must he separately provided for "The number of votes cast	each voting group entitled to vote separately on the amendment(s):
must be separately provided for "The number of votes cast by Dated Signature (By a d selecte	for the amendment(s) was/were sufficient for approval