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(Requestor's Name)				
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PICK-UP	MAIT	MAIL		
(Ru	siness Entity Name)	<u> </u>		
(00	Siness Entity Harrier			
(Do	cument Number)			
Certified Copies	_ Certificates of	Status		
Special Instructions to	Filing Officer:			
J. HORNE				
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Office Use Only



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2022 MAR 22 AM 10: 45

COVER LETTER

Division of Corporations The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$52.50 Filing Fee □\$43.75 Filing Fee & S35 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

TO: Amendment Section

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

Articles of Incorporation

FILED

2022 MAR 22 AH 10: 45

(Name of Corporation as currently filed with the Florida Dept. of State) TARY OF STATE

ALL AHASSEE, FLORE

(Document Number of Corporation (if known)

nt(s) to

Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment
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)	A professional corporation name must contain the word
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9962 Perfect Dr. Port Saint Lucie, FL 34986
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address Name of New Registered Agent	<u>:8:</u>
New Registered Office Address: Port Saint	reet address) Lucie (City) Lucie (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	with and accept the obligations of the position.
Signature of New	Registered Agent, if changing

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)

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	<u>PT</u>	John Doc	
X Remove	<u>v</u>	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	P	Milten Deimel	2485 SE Bethy Roa
Add	P	Robert Conviny	Port Saint Lucie FL 34952 9.962 Perfect Dr. Port Saint Lucie, FL
Remove Change Add			34986
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

ttach additional sheets.	dditional Articles, en if necessary). (Be s	pecific)			
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an amendment provid	ies for an exchange.	reclassification, or	cancellation of issu	ed shares,	
an amendment provid provisions for impleme (if not applicable, in	nting the amendmer	nt if not contained	in the amendment i	tself:	
(if not applicable, in	ndicate N/A)				
			·		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	after amendment file date)
(no more than 90 days	after amenament file date)
Note: If the date inserted in this block does not meet the applicable st document's effective date on the Department of State's records.	tatutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of action was not required.	of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The numb by the shareholders was/were sufficient for approval.	per of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through v must be separately provided for each voting group entitled to vote se	
"The number of votes cast for the amendment(s) was/were suffi	icient for approval
by	<u> </u>
Dated	
Signature Proportion	
(13)/a director, president or other officer – if	
elected, by an incorporator – if in the hand appointed fiduciary by that fiduciary)	s of a receiver, trustee, or other court
Lubert N. C	onwy III
(Typed or printed name of	of person signing)
/hDW C-19	
(Title of person signing)	
1/	