P0400074683

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: <u>FLORIDA</u>	3 CHOICE PAI	VTING		
	er: <u>P04000</u>				
The enclosed Articles o	of Amendment and fee are su	bmitted for filing.			
Please return all corresp	nondence concerning this ma	tter to the following:			
-	B	enson Charles Name of Contact Person			
-	<i>B.</i> (Charles Accoun	<u>ling</u>		
		• -			
-		<u>3719 ww 7 AVE</u> Address			
	2	MIAMI F1 33	168		
-		MIAMI FL 33, Cityl State and Zip Cod	e e		
_	concerning this matter, pleas	se call:	notification)	- 16 - 16	દુકાર
Name o	f Contact Person	at (<u>305</u> Area Co) 688 - 7010 de & Daytime Telephone Number	-2 }*	رز
	the following amount made			환동 기	- -
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	TALLA STATE	U 12: U1
Amer Divis P.O.	ing Address ndment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassec N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

(Name of Corporation as currently filed with the Florida Dept. of State)	
8040000 79683	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment its Articles of Incorporation:	(s) to
A. If amending name, enter the new name of the corporation:	
The new	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P A."	
BY Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent	
(Florida street address) New Registered Office Address: New Registered Office Address: Florida	5
New Registered Office Address:, Florida, [Zip Code]	<i>-</i>
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am jamiliar 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) (c), 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	Doe	
X Remove	<u>V</u> <u>Mike</u>	e lones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
i) Change	_5_	SILVIA CASTRO	2121 FILLMOSE ST
Add			HOLLYWOOD FL 33020
X Remove			
2) Change	<u>_T</u>	KIMBERLY NAVARRU	_2121 EILL MORE ST_
bbA <u>X_</u>			HOLLYWOOD FL 33020
Remove 3) Change	VP	BRANDON NAVAKRU	212/ FILLMORE ST
★ Add			-HOLLYWOOD FL 33020 E
Remove			TALL SE
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			-

E. <u>If amending or adding</u> (Attach additional sheet	s, it necessary).— (Be spe	rcific)		
 				
	<u> </u>			/
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		/		
				
	_			
			<u></u>	
F. If an amendment prov	ides for an exchange, re	eclassification, or cane	ellation of issued shares,	s o
provisions for implen	nenting the amendment indicate N/A)	if not contained in the	umendment itself:	9 ·
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The date of each amendment(s) ad late this document was signed.	option:	, if other than the
_		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bladocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
I The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
☐ The amendment(s) was/were appromust be separately provided for e	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east t	or the amendment(s) was/were sufficient for approval	
ъу	(voting group)	
Dated	26,-2022	
sciected	ector, president or other officer – if directors or officers have not been , by an incorporato – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	
¥	TAUTER WAVARRO (Typed or printed name of person signing)	20
-	(Typed or printed name of person signing)	SECUL.
_	President	
	(Title of person signing)	
		PM 12: 01 PM 12: 01 PM STATE
		PAT C
		T.