P04000098988

(Requestor's Name)
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(City/State/Zip/Phone #)
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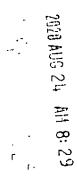


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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	Horizon Lending PRATION:	and Escrow, Inc			
DOCUMENT NUM	P04000098988 BER:				
The enclosed Article	s of Amendment and fee are s	ubmitted for filing.			
Please return all corre	espondence concerning this m	atter to the following:			
	Jose Hemandez				
	Name of Contact Person Horizon Lending and Escrow Inc				
	Firm/ Company 15642 Sand Canyon Ave unit 51553				
	Address Irvine CA 92619				
		City/ State and Zip Code			
	anthony@cpidreamhomes.co	om			
	E-mail address: (to be u	sed for future annual report	notification)		
For further information	on concerning this matter, plea	se call:			
Jose Hernandez		949 at (506-0891		
Name	of Contact Person		le & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:		
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 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		Division	Address ment Section n of Corporations ntre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corpo	ration as currentl	y filed with the Florida Dept. of State)	_
Horizon Lending and Escrow, Inc.	10000989	88	
(Do	ocument Number of	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this	Florida Profit Corporation adopts the follo	owing amendment(s) to
A. If amending name, enter the new name of the High St Seeds, Co			The new
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," " "chartered," "professional association," or the a	"Inc," or "Co . I	4 projessional corporation name main of	ontain the word
B. Enter new principal office address, if applie	cable:	Pembroke Pines FL 33326	
(Principal office address MUST BE A STREET	ADDRESS)	Tembroke Times Times	<u></u>
C. Enter new mailing address, if applicable:		15642 Sand Canyon Ave Unit 51553	r. 24
(Mailing address MAY BE A POST OFFIC	<u>L BON</u>)	Irvine Ca 92619	三
			21/29 MJC 214 AII 18: 29
D. If amending the registered agent and/or re new registered agent and/or the new regist	gistered office address	dress in Florida, enter the name of the	
N/A			
Name of New Registered Agent			
	(Florida s	treet address)	
N/A	(-	Florida	
New Registered Office Address:		(City)	(Zip Code)
New Registered Agent's Signature, if changin I hereby accept the appointment as registered as	i <mark>g Registered Ager</mark> gent. I am familiai	nt: r with and accept the obligations of the pos	ition.
	Signature of New	Registered Agent, if changing	
Check if applicable The amendment(s) is/are being filed pursuan	nt to s. 607.0120 (1)	1) (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	<u>PT</u>	John Doe	<u>-</u>	
X Remove	<u>v</u>	Mike Jon	<u>oes</u>	
X Add	<u>sv</u>	Saily Sm	<u>ith</u>	
Type of Action (Check One)	Title		<u>Name</u> N/A	<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				

amending or adding additional Articular track additional sheets, if necessary).	(Be specific)	
ovisions for implementing the amen	nge, reclassification, or cancellation of diment if not contained in the amendm	fissued shares,
(if not applicable, indicate N/A)	Amena in the amenant	ent usen:
• •		

.

·	N/A	_, if other than the
The date of each amendment(s) adopt date this document was signed. N/A	ion:	-
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will then the state's records.	not he
Adoption of Amendment(s)	(CHECK ONE)	
☑ The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of directors wi.	
by the shareholders was/were suffic		
☐ The amendment(s) was/were approx must be separately provided for ea	ved by the shareholders through voting groups. The fc ch voting group entitled to vote separately on the amen	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
N/A by	(voting group)	
, —	(voting group)	
08-19-20		
selected.	ector president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diduciary by that fiduciary)	
J	ose Hernandez	

(Typed or printed name of person signing)

(Title of person signing)

President