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## **COVER LETTER**

Division of Corporations	
NAME OF CORPORATION: DE	6 Investment Sinic, con
DOCUMENT NUMBER: POHO	000110924
The enclosed Articles of Amendment and fee an	re submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Ochia r	1 Duarte
D 56 }	Name of Contag Person  NULL WIN Suri C
32645	Firm/Company SW 132 P LA CP
leiani	F ( 33175
Celia (De	City/ State and Zip Code  Would Stanfusurova
E-mail address: (to b	be used for future annual report notification)
For further information concerning this matter,	please call:
lelia M Quarer	ar. 305,439.2171
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount m	ade payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of State	
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
Tananassee, FL 32314	Tallahassee, Fl. 32303

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	ticles of Amendment	ALL ALL
Art	to to	CR ACR
Artic	cles of Incorporation	25 E
1)0/1	of O	<i>₩</i> 55
1) E O trustwell	Spring, Corp.	
(Name of Corporation as	s currently filed with the Florida Dept. of State)	
<u> 404 000 11093</u>	- 4	7.7
(Document )	Number of Corporation (if known)	<u></u>
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the follo	owing amendment(s
A. If amending name, enter the new name of the corpor	ration:	
name must be distinguishable and contain the word "corpor	ration." "company " or "incorporated" or the abbre	The new
"Inc.," or Co.," or the designation "Corp," "Inc," or	"Co". A professional corporation name must co	ontain the word
"chartered," "professional association," or the abbreviation	on "P.A."	P1
B. Enter new principal office address, if applicable:	3264 SW 100	· 0 rces
(Principal office address <u>MUST BE A STREET ADDRES</u>	5) hian \$133	(75)
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered of		
new registered agent and/or the new registered office	e address:	
Name of New Registered Agent		
	Florida street address)	
New Registered Office Address:	Florida	
ACS REGISTERA Office Mauress.	(Civ)	(Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am		·
т петеоу ассері іне арронишені ах гедіметса адені. Тат	jamuiur wiin una accept the oringations of the positi	ion,
Signature	of New Registered Agent, if changing	
Charle if applicable		

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> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	Title Name	<u>Addres</u> s
1) Change	Russdad Annia Davis	3264 SW 132PL Liai (133175
Add		Man (18314)
_X_ Remove	Proside Paia & Quarte	0. 1. 1. 0. 1. 10. 01
2) Change	Prosided lois of busines	3264 SU 132 PL friani F(33171)
_X_ Add		fudui f (331+)
Remove Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		· <del></del>
Add		
Remove		
6) Change		
Add		
Remove		

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	
<del></del>		
If an amendment provides for an excl	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
()		

:

The date of each amendment(s) adoption: 2 8 2023	, if other than the
date this document was signed.  Effective date if applicable: 2 8 20 23	
(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 document's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	d shareholder
☐ 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 Celia He Doante.	
(voting group)	
Dated 2 0 2 0 2 3 Signature	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<del></del>
selected by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
d c	
relea or because.	
(Typed or printed name of person signing)	
Jusobent.	
(Title of person signing)	