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SECRETARY OF STATE
TALLAHASSEE, FL

R. WHITE AUG 3 0 2018

COVER LETTER

TO: Amendment Section

Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

| NAME OF CORPOR | ATION: Dale: | omy Con | P. | |
|--|--|---|---|--|
| NAME OF CORPORATION: $2a(c)ma$ (exp) DOCUMENT NUMBER: $P4544122433$ | | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | |
| Please return all corres | pondence concerning this ma | tter to the following: | | |
| | LES | Name of Contact Person | <u>S</u> | |
| | Pales | Firm/ Company |) , | |
| | 7950 NW 167 TERRACE Address Migni Lakes FL 33016 City/ State and Zip Code | | | |
| - | Migni La Ces Fl 33016 City/ State and Zip Code | | | |
| E-mail address: (to be used for future annual report notification) | | | | |
| For further information concerning this matter, please call: | | | | |
| LESTER | DEB5 | at(305 | 310.5939 de & Daytime Telephone Number | |
| Name o | f Contact Person | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check for | the following amount made I | 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 | | Street Address Amendment Section | | |

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

FILED

2018 AUG 27 AM 11: 33

| | of | | MOO E 1 MU 11: 33 | |
|--|--|------------------------------|-----------------------------------|---------------------|
| | - lalesn | 19 (SEC | BETARY OF STATE | |
| (Name o | of Corporation as current | | | |
| | DOSOO | \$12243 | 3 | |
| | Document Number o | f Corporation (if know | <u></u> | |
| Pursuant to the provisions of section 607. its Articles of Incorporation: | 1006, Florida Statutes, this | Florida Profit Corpor | vation adopts the following amend | dment(s) to |
| A. If amending named enter the new na | me of the corporation: | | art. | |
| name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associat | ation "Corp," "hic," or " | 'Co". A professional | 'incorporated" or the abbrevia | new ition the |
| B. Enter new principal office address, i (Principal office address <u>MUST BE A ST</u> | | N/A | | _ |
| C. Enter new mailing address, if applications and the second of the seco | | N/A | | _ |
| D. If amending the registered agent and new registered agent and/or the new | d/or registered office addr registered office address | ess in Florida, enter t | the name of the | _ |
| Name of New Registered Agent | LESTER | DEB 5 | | |
| | 7950 NU | y 1.19 / | EARACE | |
| New Registered Office Address: | Migmi Cak | es 3 | Florida 33016 (Zip Code) | <u>.</u> |
| New Registered Agent's Signature, if ch I hereby accept the appointment as registe | anging Registered Agent: ared agent. I can familiar w | with and accept the obl | igations of the position | |
| New Registered Agent's Signature, if ch I hereby accept the appointment as registe | anging Registered Agent: red agent. I can familiar w | , with and accept the obl | igations of the position | |

Page 1 of 4

Signature of New Registered Agent, if changing

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 = Chiej 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 | $\underline{\mathbf{V}}$ | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| 1) Change | <u>P</u> | Publo DEBS | 7950 NW 167 TER Wiam, Lakes, FL |
| Add | | l | Miam, lakes, FL |
| Remove | | | 33016 |
| 2) Change | P | LESTER DEBS | 7950 NW 167TER |
| Add | | | Minn, Lakes, FL |
| Remove | | | 33016 |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | · | _ | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| V/A | ets, if necessary). | | | | | |
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| an amendment pro rovisions for imple (if not applicable | ovides for an excha ementing the amen e, indicate N/A) | inge, reclassifica dment if not cor | ition, or cancella itained in the an | ition of issued s rendment itself: | hares, | |
| N/H_ | 11-00-0 | | | | <u> </u> | |
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| The date of each amendment(s) adoption:date this document was signed. | , if other than the |
|--|---|
| Effective date if applicable: 8/20/2013 | 8 |
| (no more than 90 days after ame | endment file date) |
| Note: If the date inserted in this block does not meet the applicable statutory fidocument's effective date on the Department of State's records. | iling requirements, this date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the shareholders. The number of votes by the shareholders was/were sufficient for approval. | s cast for the amendment(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groumust be separately provided for each voting group entitled to vote separately of | |
| "The number of votes cast for the amendment(s) was/were sufficient for a | pproval |
| by | |
| (voting group) | |
| ☐ The amendment(s) was/were adopted by the board of directors without shareho action was not required. | lder action and shareholder |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action was not required. | action and shareholder |
| Dated 8/22/2018 Signature DM MRHAS | |
| Signature Dry prohited | |
| (By a director, president or other officer – if directors selected, by an incorporator – if in the hands of a received | |
| appointed fiduciary by that fiduciary) | iver, tristee, or outer court |
| May be Dess (Typed or printed name of person s | incire) |
| Λ | |
| Title Operson signing | <u>.+</u> |
| (1 Hiệ 01 person signing |) |