P0600000196

(F	Requestor's Name)		
(A	Address)		
(<i>f</i>	Address)		
(0	City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL	
(E	Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of \$	Status	
Special Instructions t	o Filing Officer:		
<u> </u>			

Office Use Only



200316463732

08/08/18--01019--007 **35.63

18 AUG -6 PM 3: 3

AUG 0 7 2018 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: SUBRISE	HOME AND GA	IRDEN Corporation
DOCUMENT NUMBE	R: <u>P0600015</u>	0796	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this mat	tter to the following:	
	Nina Wai	Name of Contact Person	n
_	_	Firm/ Company	
	8276 Cas	isla Terr	
	Tamar	Address AC FL 3336 City/ State and Zip Cod	21
		@ aol.com	
For further information c	oncerning this matter, pleas	se call:	
	Warshaw Contact Person		, 540 6462 de & Daytime Telephone Number
	he following amount made p		,
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ameno Divisio P.O. B	ng Address Iment Section on of Corporations ox 6327 assee, FL 32314	Ameno Divisio Cliftor	Address Iment Section on of Corporations i Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

of

SUNRISE HOME		rden	Corpora				
	ame of Corporation as		<u>filed with the Fl</u>	orida Dept. of State	<u>e</u>)		
- P06	000 150794			-			
	(Document !	Number of C	Corporation (if kn	own)			
Pursuant to the provisions of section its Articles of Incorporation:	697,1006, Florida Stat	tutes, this F_i	lorida Profit Cor	poration adopts the	following	amend	lment(s) to
A. If amending name, enter the n	ew name of the corpor	ration:					
						The n	iew
name must be distinguishable and "Corp.," "Inc.," or Co.," or the coword "chartered," "professional as	lesignation "Corp." "I	Inc. " or "C	o". A profession	r "incorporated" o nal corporation nan	or the above	breviat ontain	ion the
B. Enter new principal office add (Principal office address <u>MUST Bi</u>		<u>SS</u>)					_ _
C. Enter new mailing address, if (Mailing address MAY BE A P					SICE TO	18 AUG -6	-
D. If amending the registered age new registered agent and/or the			ss in Florida, en	ter the name of the	L. FLOR	<u>ક</u> ઝ	0
Name of New Registered A	gent				<u> </u>	36	
		(Florida strec	et address)	_			
N. B. C. LOW AL			,	Stantila			
<u>New Registered Office Ada</u>	<u> </u>		 Tity)	, Florida	(Zip C	ode)	_
New Registered Agent's Signatur I hereby accept the appointment as	registered agent Lam	ı familiar wi			osition.		
	Signature	e of New Re	gistered 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 = 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.

Example:		
X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
_X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	VP Rosi Farahi	Lake Worth Fr 3346:
X Add		Lake Worth Fr 3346:
Remove		
2) Change		
Add		
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

I amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<u></u>	
-	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares.
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendment(s) adoption: 8/1/18 date this document was signed.	, if other than the
Effective date if applicable: 8 1 18 (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.	I not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature	
(By a director, president or other officer - if directors or officers have not been	_
selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Moon in Farah (Typed or printed name of person signing)	
President (Title of person signing)	
(Title of person signing)	