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SECRETARY OF STATES

COVER LETTER

TO: Amendment Section Division of Corporations The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status

Mailing Address

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address

(Additional copy is

enclosed)

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Certified Copy

is enclosed)

(Additional Copy

Articles of Amendment

to

Articles of Incorporation

ration FILED

of	f I was true
Hayden + Associa	ates CRC 2021 DEC-6 PM 4: 16
(Name of Corporation as currently	y filed with the Florida Dept. of State)
Da710005449L	y filed with the Florida Dept. of State) SECRETARY OF STATE TALLAHASSEE, FLORIDA
	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Dragon-Fondalnc.	The new
name must be distinguishable and contain the word "corporation," "c". "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	14211 Forda Ln. Bokeelia, FL 33922
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Sant
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	
Name of New Registered Agent Dion Ma	sterson
14211 Far (Florida str.	eet address)
New Registered Office Address: Bolevia	(City) Florida 33900 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar v Signature of New Re	

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)

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> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	<u>xe Jones</u>	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) <u>X</u> Change	P	Kenneth W. Hayden	16280 Snapdragon
Add			Ff Myers, Fc 33912
Remove		•	
2)Change	<u>4</u>	Dian Rmasterson	14211 Fonda Les
Add			Bokaelia, 1233922
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

<u>If ame</u> (Attacl	ending or ad h <i>additional</i> .	lding add sheets, if n	itional Art vecessary).	icles, enter (Be spec	r change(<u>s</u> ific)	<u>) here</u> :				
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date this document was signed.		
Effective date <u>if applicable</u> :	(
	(no more than 90 days after amendment file da	ite)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirem partment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board of directors without shar	eholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	sted by the shareholders. The number of votes cast for the afficient for approval.	amendment(s)
	oved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amenda	
"The number of votes east f	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated 11 15 E		
Signature	ROOM	
(By a di	ector, president or other officer – if directors or officers had by an incorporator – if in the hands of a receiver, trustee, of diduciary by that fiduciary)	
	Dien EMasterson	
-	(Typed or printed name of person signing)	
	UP	
-	(Title of person signing)	