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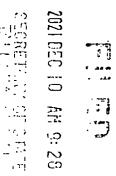
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PICK-UP WAIT MAIL			
(Business Entity Name)			
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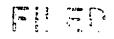
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR.	ATION: STAGHOLI	n Stables In	<u>C</u>
DOCUMENT NUMB	ER: PØ7 0000	6721	C
The enclosed Articles o	f Amendment and fee are su		
Please return all corresp	oondence concerning this ma	tter to the following:	
-	Stacie E	LAM Name of Contact Person	1
_	<u>Staghern</u>	STABLES INC.	
-	705 SW B	Name of Contact Person STABLES TNC. Firm/ Company CY ANT ANE Address	
		City/ State and Zip Code	
_	deister 78	Danvil. com sed for future annual report	
	concerning this matter, plea-	se call:	
Name of	Contact Person	at (Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallabaseon FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation



STAGITORN STABLES, TWG.

(Name of Corporation as currently filed with the Florida Dept. of State). 2021 DEC 10 AM 9: 28 P 9 7 9 9 9 6 6 9 2 1 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: ELAM STABLES INC. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 505 SWBRYANT AVE SWART, FL 34994 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent V New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

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)

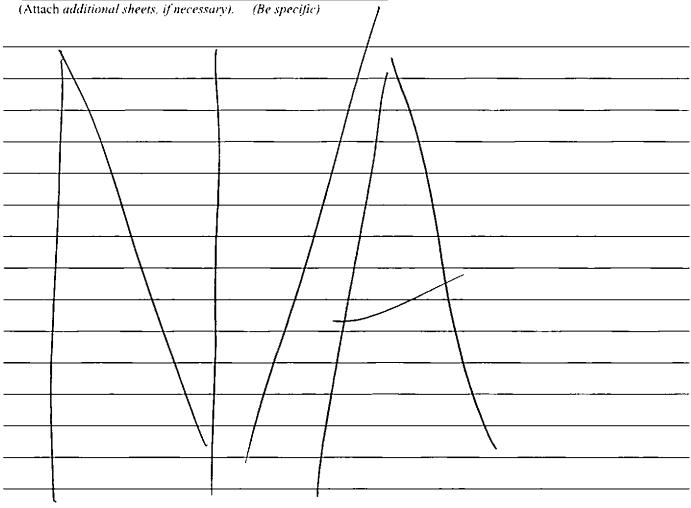
Please note the officer/director title by the first letter of the office title:

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.

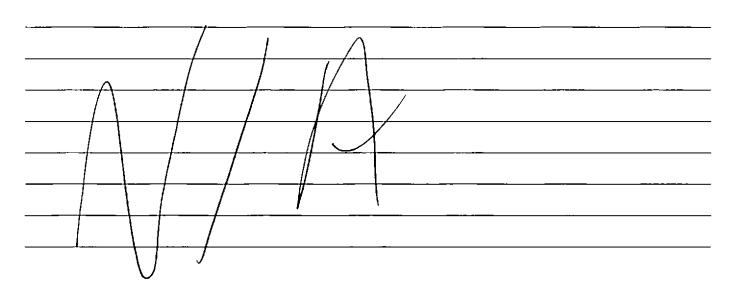
Example: X Change <u>PT</u> John Doc X Remove \underline{V} Mike Jones SV \underline{X} Add Sally Smith Type of Action <u>Title</u> Name Address (Check One) BriAN ELAM CEO 705 SW Bryon AVE 1) ____ Change STUMET, FL 34994 ____ Add V_Remove 2) ____ Change ___ Add __ Remove 3) ____ Change ____ Add ___ Remove 4) ____ Change Add ____ Remove 5) ____ Change ____ Add Remove 6) ____ Change ____ Add ___ Remove

E. If amending or adding additional Articles, enter change(s) here:



F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)



The date of each amendment(s) add date this document was signed.	ption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ck does not meet the applicable statutory filing requirements artment of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of directors without sharehold	der action and shareholder
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the americient for approval.	ndment(s)
	oved by the shareholders through voting groups. The following ach voting group entitled to vote separately on the amendment	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	•	
	(voting group)	
selected,	ector, president or other officer – if directors or officers have not by an incorporator – if in the hands of a receiver, trustee, or ot a fiduciary by that fiduciary) Briant STACIE ELVIN	
	(Typed or printed name of person signing)	
_	DIFECTOR / President CEO	
	(Title of person signing)	