P080000 20453

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |

Office Use Only



900400156629

01/15/25--01007--020 ++35.00



of 31171223

COVER LETTER

TO: Amendment Section

| Division of Corporations | | | | | |
|--|--|--|--|--|--|
| NAME OF CORPORATION: DOCUMENT NUMBER: | Anglia | Armony 1, | n C | | |
| DOCUMENT NUMBER: | <u>080000</u> | 20453 | ·· · | | |
| The enclosed Articles of Amenda | | | | | |
| Please return all correspondence | concerning this ma | tter to the following: | | | |
| - | JEnniF | Name of Contact Person Firm/ Company | <u>.</u> | | |
| - | | Name of Contact Person | 1 | | |
| | ADGUTA | Annory 1 | 1 C | | |
| | | Firm/ Company | | | |
| 1413 | 1 93m | PLACE Address | | | |
| <u> </u> | | Address | | | |
| STO | 1001-T | FL 3377 | 6 | | |
| | SIMMOLT, FL 33776 City/State and Zip Code | | | | |
| | | - | C-0- | | |
| HO | GLZRA | ed for future annual report | SMAIL, COM | | |
| в-та | ii address: (to be us | ed for future annual report | nonneation) | | |
| For further information concerning | ng this matter, pleas | se call: | | | |
| JEnnifth 6 | MALZ | at (727 | 286.0977 | | |
| Name of Contact | Person | | de & Daytime Telephone Number | | |
| Enclosed is a check for the follow | ving amount made | payable to the Florida Depa | artment of State: | | |
| _ | 3.75 Filing Fee & tificate 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 | | Street Address | | | |
| Amendment Se | | Amendment Section | | | |
| Division of Cor P.O. Box 6327 | роганопѕ | Division of Corporations The Centre of Tallahassee | | | |
| Tallahassee, FI | _ 32314 | | 2415 N. Monroe Street, Suite 810 | | |
| t destroys the day 1 and 2 deal 2 1 | | Tallahassee, FL 32303 | | | |

Articles of Amendment

Articles of Incorporation

of

| Anguer A | | | | 2023 JAN 13 | Pil F. Oc |
|--|---|---------------------------------|----------------------|--------------------|---------------|
| _ | | rently filed with the | e Florida Dept. of | <u>State</u>) | - • |
| P0800 | 50020 <i>4</i> | 153 | | Till 1 | - 312 |
| | (Document Num | ber of Corporation (| if known) | | 1.00 |
| Pursuant to the provisions of section 607.10 ts Articles of Incorporation: | 006, Florida Statutes | , this <i>Florida Profit</i> | Corporation adopts | s the following am | endment(s) to |
| A. If amending name, enter the new nam | ne of the corporation | <u>on:</u> | | | |
| 019 | | | | The | e new |
| name must be distinguishable and contain the "Inc.," or Co.," or the designation "Con "chartered," "professional association," o | rp," "Inc," or "Co | ". A professional | | he abbreviation "C | Corp.," |
| B. Enter new principal office address, if Principal office address <u>MUST BE A STR</u> | | 0/9 | | | |
| C. Enter new mailing address, if applica (Mailing address <u>MAY BE A POST OF</u> | | <u> </u> | | | |
|). If amending the registered agent and/ new registered agent and/or the new r | | | , enter the name o | <u>f the</u> | |
| Name of New Registered Agent | NA | | | | |
| _ | (Flori | da street address) | | | |
| New Registered Office Address: | | | , Flo | orida | |
| | | (City) | | (Zip Code) | |
| New Registered Agent's Signature, if cha hereby accept the appointment as register | nging Registered A ed agent. I am fami | sgent: iliar with and accept | the obligations of i | the position. | |
| · | Signature of N | ew Registered Agent | t, 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 Doe | |
|----------------------------|--------------------|---------------------------------------|------------------|
| X Remove | <u>V</u> 1 | Mike Jones | |
| X Add | <u>sv</u> <u>s</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | <u></u> | RICHARD FABRIZI | 5263 615 Avz 5 |
| Add Remove | | | 57. Betwissag FL |
| 2) Change | | · · · · · · · · · · · · · · · · · · · | |
| Add | | | |
| Remove Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | *** |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| 100000 | NA | | | |
|-----------------|--|---------------------------|--------------------------|----------|
| | | | | |
| | | . | | |
| | <u></u> | <u> </u> | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| ··· | | | | |
| | , | | | |
| | | 1.00 | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | ., |
| | | | | |
| n amendment | provides for an exchange, re | classification, or cance | llation of issued shares | 1 |
| if not applice) | plementing the amendment ible, indicate N/A) | if not contained in the s | amenament itseii: | |
| | | | | |
| \ | To 000, 7 | 50% | SHARTS | <u> </u> |
| | th MALZ | | 2 USIGNE 2 | |
| AMES | MALZ JR | <u>50%</u> | SHAR IS | 2 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

.

| The date of each amendment(s) adoption: | 122, if other than the |
|--|--|
| date this document was signed. | |
| Effective date if applicable: 12/3//2 | days after amendment file date) |
| (no more than 90 | days after amendment file date) |
| Note: If the date inserted in this block does not meet the applica document's effective date on the Department of State's records. | ble statutory filing requirements, this date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the incorporators, or b action was not required. | pard of directors without shareholder action and shareholder |
| ☐ The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval. | number of votes cast for the amendment(s) |
| ☐ The amendment(s) was/were approved by the shareholders thromust be separately provided for each voting group entitled to v | |
| "The number of votes cast for the amendment(s) was/were | sufficient for approval |
| by | |
| by(voting group) | |
| Dated 1/10/23 | |
| Signature Signature | |
| (By a director, president or other office | er – if directors or officers have not been |
| selected, by an incorporator – if in the appointed fiduciary by that fiduciary) | hands of a receiver, trustee, or other court |
| | |
| (Typed or printed no | MALZ |
| (Typed or printed n | ame of person signing) |
| Patsiotist | |
| (Title of person sign | ning) |