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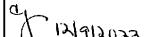
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	E H INVESTMENT INC
DOCUMENT NUMBER:	P09000060562
The enclosed Articles of Amendmen	and fee are submitted for filing.
Please return all correspondence con-	erning this matter to the following:
	EVRIS HALL
	Name of Contact Person
	E H INVESTMENT INC
	Firm/ Company
	10332 NW 2ND COURT
	Address
	PLANTATION, FL 33324
	City/ State and Zip Code
	Evrishall@gmail.com
E-mail ac	ress: (to be used for future annual report notification)
For further information concerning the	s matter, please call: 954 821-8134 ut ()
Name of Contact Pers	
Enclosed is a check for the following	amount made payable to the Florida Department of State:
	Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee the of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32	tions Division of Corporations The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation of

2023 8:07 21 | FM 11: 48

	E H INVE	STMENT INC	1 .	,
(Name of Corp	oration as currentl	y filed with the Florid	Dept. of State)	
	P090000605	i62		
(L	Ocument Number o	Corporation (if known)	
Pursuant to the provisions of section 607,1006, F is Articles of Incorporation:	lorida Statutes, this	Florida Profit Corpora	tion adopts the following amer	ndment(s)
a. If amending name, enter the new name of t	the corporation:			
N/A			Tr(
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the d	"Inc." or "Co". A	company," or "incorpor professional corpora	The ated" or the abbreviation "Co-tion name must contain the vision representation of the state	new rp.," word
Fator now aging incl. of flow address: if and it	k l		N/A	
Enter new principal office address, if applied Principal office address MUST BE A STREET	<u>caole:</u> [ADDRESS]			
				<u> </u>
Enter new mailing address, if applicable:				_
(Mailing address MAY BE A POST OFFICE	E BOX)		N/A	
		-		
				_
. If amending the registered agent and/or reg	gistered office addr	ess in Florida, enter th	<u>ie name of the</u>	
new registered agent and/or the new regist-	ered office address:			
Name of New Registered Agent	N/A			
- ,	(Florida stre	et address)		
New Registered Office Address:	N/A		theat L	
ACTORICE SHOPE OFFICE AND PESS.	(City)		, Florida	_
			·	
ew Registered Agent's Signature, if changing	Registered Agent:			
hereby accept the appointment as registered age	rnt. I am familiar w	uth and accept the oblig	ations of the position.	
	Signature of New Re	gistered Agent, if chang	eing	

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.

<u>PT</u>	John Doe	
<u>V</u>	Mike Jones	
<u>SV</u>	Sally Smith	
Title	Name	Address
p	EVRIS HALL	10332 NW 2ND CT
		PLANTATION, FL 33324
		
	Y SV Title	V Mike Jones SV Sally Smith Title Name

	NT" OI
SHOWN AS "PRESIDENT". THE CHANGE IS BEING MADE TO CLARIFY HIS POSITION AS "PRESIDE? E H INVESTMENT INC	NT" OI
E H INVESTMENT INC	
	_
	_
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)	
	<u>.</u>

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(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 wi document's effective date on the Department of State's records.	II not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action an action was not required.	d shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 east for the amendment(s) was/were sufficient for approval	
by EVRIS HALL	
(voting group)	
DatedSignature	
(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)	
EVRIS HALL	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	

. . .