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SECRETARY OF STATE TALL AND SECRETARY OF STATE

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COVER LETTER

TO: Amendment Seçti- Division of Corpo						
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NAME OF CORPOR	ATION: CHUHO C	raigh Juc) the			
DOCUMENT NUMB	er: <u> </u>	00325Le				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this mat	tter to the following:				
-	Thor	nas Difu	دمون			
Name of Contact Rerson						
•	Firm/ Company					
-	3191) Hugleo	West			
	Muly	Address	3860			
City/ State and Zip Code						
TOOTHERE OF GLADIN COM						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Y .						
Thomas	Difilippo	at (813	J433-830Q			
Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
	ling Address andment Section		Address dment Section			

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation Corporation as currently filed with the Florida Dept. of State) (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: The new 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." 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 (City)

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

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 <math>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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	James J Rodsiek	4.0, Box 59004
Add			N. Redungton Beech
Remove			F1 33708
2) Change	<u>S</u>	Linder J Rodsick	P.O. Box 59004
Add			N. Redungton Brach FI
Remove		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	33708
3) Change	P	Thomas WH I Uppo	11512 EAST BAY RD.
Add		•	GIBSONTON, FL. 33
Remove			
4)Change	$\sqrt{}$	RICHARD E. DIFILIPPO	307 N. LENNA AVE
Add			SEFFNER, FI.
Remove			
5) Change	<u></u>		
Add			
Remove			
6) Change			
Add			
Remove			

Attach a	dditional sheet	s, if necessary).	. (Be specific)			
				 			
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<u>f an a</u> m	nendment prov	ides for an exc	change, reclass	ification, or o	ancellation of	issued shares.	
provisi	ons for implen	nenting the am	endment if no				
	not applicable,	•					. 1
			SHARES	FROM	JAME,	J. KADSICA	k Hw
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KICK	HARD E.	AHLINO	HS INDI	CATED OF	N MEETIN	g of THE	PUNUT
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The date of each amendment(s) adoption:	, if other than the		
uate uns document was signed.			
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	 ·		
Adoption of Amendment(s) (CHECK ONE)			
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 cast for the amendment(s) was/were sufficient for approval			
by OFFICIER OF THE CORBRATION "			
(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.			
Date: 7-20-20 3			
(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)			
THOMAS A. DIFILIPO I (Typed or printed name of person signing) PRESIDENT			
(Typed or printed name of person signing)			
PRESIDENT			
(Title of person signing)	_		