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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Harris Lynne Inc			
	BER: P12000060239			
The enclosed Articles	of Amendment and fee are so	ubmitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following:		
	Kerry Roberts			
		Name of Contact Perso	n	
	ACES, Inc			
		Firm/ Company		
	13575 58th Street North, Sui	• •		
	Address			
	Clearwater, FL 33760			
		City/ State and Zip Cod	e	
		,		
krobe	erts@acesworksforyou.com			
	E-mail address: (to be u	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
Kerry Roberts		at (727) 538-4200 de & Daytime Telephone Number	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Harris Lynne Inc	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P12000060239	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation" Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "(word "chartered," "professional association," or the abbreviation "I	'o". A professional corporation name must contain the
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NIA
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	NIA
D. If amending the registered agent and/or registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	A address)
New Registered Office Address:	ity) , Florida
	→t Etro sia
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent.—I am familiar wi	
Signature of New Res	gistered 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 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u>S</u>	Elizabeth Wilmot Waldow	13575 58th Street North
XX Add			Suite 339
Remove			Clearwater, FL 33760
2) Change			<u> </u>
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			<u></u>

ttach <i>additiona</i>	l sheets, if necessa	ry). (Be specifi	c)		
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an amendmen	t provides for an e	exchange, reclas	sification <u>, or canc</u>	ellation of issued s	hares,
<u>rovisions for i</u>	mplementing the a cable, indicate N/A	<u>amendment</u> if no	t contained in the	amendment itself	<u>:</u>
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The date of each amendment(s) adoption:	, if other than the
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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 document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendmen by the shareholders was/were sufficient for approval.	ı(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	der
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
08/21/2017	
Signature (By a director, president or other officer – if directors or officers have not been	
selected, by wincorporator – if in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)	ırt
Kerry Roberts, President of ACES, Inc as Treasurer for Harris Lynne	ne
(Typed or printed name of person signing)	 -
Treasurer	
(Title of person signing)	