P130000 40884

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COVER LETTER

TO: Amendment Section

Division of Corporations	
name of corporation: Mag	Hhew Laison Homes, INC.
DOCUMENT NUMBER: P1300	0040884
The enclosed Articles of Amendment and f	fee are submitted for filing.
Please return all correspondence concerning	
	Name of Contact Person WY LAISON HOMES Firm/ Company WY 87 Navaire, FL. 32566 Address ITE, FL. 37566 City/ State and Zip Code 1336@GMCWL. Lim It to be used for future annual report notification)
For further information concerning this ma	atter, please call:
MaH Lat Son Name of Contact Person	at (750) 910 - 5977 Area Code & Daytime Telephone Number
Enclosed is a check for the following amou	unt made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Certificate of	g Fee & S43.75 Filing Fee & S52.50 Filing Fee Status Certified Copy Certificate of Status (Additional copy is enclosed) 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

of

Mathew La	(Son Homes ± filed with the Florida Dept. of State	VC.
<u> </u>		
P1300040884	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 t	ollowing amendment(s) to
A. If amending name, enter the new name of the corporation:		
Lasson Business Ven	tures, INC.	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abb professional corporation name must	reviation "Corp.," contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA	

		TS2
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ALLA	دد. •
(Maning dadress MATT MENT OF THE BOX)	** *	
		
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:		կ։ 28
Name of New Registered Agent NA		
The state of the s		
(Florida stre	vet address)	
New Registered Office Address:	, Florida_	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	: with and accept the obligations of the pe	osition.
Signature of New Ro	egistered Agent, if changing	

Check if applicable

If 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>	<u>John Do</u>	<u>oe</u>	
X Remove	V	Mike Jo	nes	
X Add	<u>SV</u>	Sally Sn	nith	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				<u> </u>
4) Change		-		
Add				
Remove				
5) Change				
Add		 -		
Remove				
6) Change				
Add		-		
Remove				

E. <u>If amending or adding</u> (Attach <i>additional sheet</i>	<mark>r additional Articles, e</mark> t ts, if necessary). (Be s	nter change(s) her pecific)	<u>'e</u> :		
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			<u></u>		
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		· · · · · · · · · · · · · · · · · · ·			
 If an amendment pro- provisions for imple 	menting the amendmer	reclassincation, on t if not contained	in the amendmen	<u>it itself:</u>	
(if not applicable	, indicate N/A)				
NA				<u> </u>	.,
					
				··	<u></u> ,
		.,			.
					
		<u> </u>			<u></u>

The date of each amendment(s) adoption date this document was signed.	otion: 8 13 2020	, if other than the
Effective date if applicable:	8/13/2020 (no more than 90 days after amendment file	date)
Note: If the date inserted in this bloc document's effective date on the Depa	k does not meet the applicable statutory filing require	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without sl	hareholder action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes east for the cient for approval.	he amendment(s)
☐ The amendment(s) was/were appro must he separately provided for ea	ved by the shareholders through voting groups. The fo ch voting group entitled to vote separately on the amer	llowing statement ndment(s):
"The number of votes cast for	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
selected,	etor, president or other officer – if directors or officers by an incorporator – if in the hands of a receiver, truste if fiduciary by that fiduciary)	
_	(Typed or printed name of person signing) I (E) (Lent) (Title of person signing)	