P14000043880

(Re	equestor's Name)			
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(Bu	usiness Entity Nam	e)		
(Document Number)				
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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Harmonie Consultant Inc. DOCUMENT NUMBER: P14000043880
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
- Jennifer Stokes Name of Contact Person
Harmonie Consultant Inc.
10311 Sim(a D)
Jan 17. 32077
City/ State and Zip Code JAXHOMES WITH LENGTH AND CON E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jennifer Stokes at 904 903 0494 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 Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee 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

Harmonie Consultant Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)
<u> </u>
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amenits Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Jennifer yawn Stokes Inc The
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevic "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable:
(Principal office address <u>MUST BE A STREET ADDRESS</u>)
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
(Florida street 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 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 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		<u> </u>	
Add			
Remove			
2) Change		·	<u> </u>
Add			
Remove			·
3) Change			
Add			
Remove			
4) Change			
Add			<u> </u>
Remove			
5) Change			
Add			
Remove			
6) Change	-	-	-
Add			
Remove			

(Attach additional sheets, if necessary,	<u>articles, enter change(s) here</u> : v). (Be specific)
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•	Die Duli aus.
	DF BUSTALOS
	
lf an amendment provides for an ex	schange, reclassification, or cancellation of issued shares.
provisions for implementing the an	mendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

date this document was signed. Effective date if applicable:	
(nb more than 90 klays after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	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 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"	
(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.	
Dated	
Signature	
(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)	
Jennifer It Stoke	<u></u>
(Typed or printed name of person signing)	
Ouno/prez	