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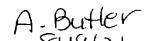




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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: DENNIS STEWA	RT, P.A.	
DOCUMENT NUN	1BER: P15000051671		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Dennis Stewart		
		Name of Contact Perso	n
		Firm/ Company	
	PO BOX 39894		
		Address	-
	FORT LAUDERDALE, FL	33339	
		City/ State and Zip Cod	le
	stewart765@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati Dennis Stewart	on concerning this matter, plea		3038885
Name	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ar Di P.C	nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Ameno Divisio The C 2415 i	Address Ilment Section on of Corporations Tentre of Tallahassee N. Monroe Street, Suite 810 assec, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

(Name of Corporation as currently filed with the Florida Dept. of State) **PLEGERAL OF STATE **PLEGERAL OF STATE	DENNIS STEWART, P.A.		2021 AUG -6 AM 8: UZ
(Document Number of Corporation tif known) (Corporation tif known) (Document Number of Corporation tif known) (Corporation tif known) (Plane Must be distinguished not contain the word "corporation tif known) (Corporation tif known) (Corporation tif known) (Plane Must be distinguished not contain the word "corporation tif known) (Corporation tif known) (Plane Must be distinguished not the abbreviation "P.A." (Document Number of Corporation (Plane Must be distinguished not contain the word "corporation to the abbreviation "P.A." (Document Number of the corporation to the abbreviation "Corporation to the abbreviation "Corporation to the abbreviation "P.A." (Document Number of the abbreviation	(Name	of Corporation as curren	tly filed with the Florida Dept. of State)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendm to Articles of Incorporation: The new name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "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 Enter new mailing address if applicable: (Mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable: (Mailing address if applicable) Enter new mailing address if applicable if applicable if applicable if applicable if applicable if applicable if a	P15000051671		SECRETAL OF STATE TALLAHASSEE, FL
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.". A professional corporation name must contain the word "chartered." Professional association. "or the abbreviation "P.A." 3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) 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: Name of New Registered Agent 2419 E. Commercial Blvd., Suite 101 (Florida street address) Fort Lauderdale. Fort Lauderdale plotted. Suite 101 (Florida street address) Fort Lauderdale Fort Lauderdale plotted. Suite 101 (Florida street address) New Registered Office Address: (City) ((Document Number	of Corporation (if known)
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." 3. Enter new principal office address if applicable: Principal office address MUST BE A STREET ADDRESS) 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 registered office address: Name of New Registered Agent 2419 E. Commercial Blvd., Suite 101 (Florida street address) New Registered Office Address: Fort Lauderdale City) (City) (Zip Code) Seew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. Lam familiar with and accept the obligations of the position.		,1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s)
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Enter new principal office address if applicable: (Principal office address MUST BE A STREET ADDRESS) Fort Lauderdale, FL 33308 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	"Inc.," or Co.," or the designation "C	Corp." "Inc," or "Co".	A professional corporation name must contain the word
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hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	HER REGISTERED OFFICE MULITESS.	-	
Signature of New Registered Agent, if changing			
	-	Signature of New I	Registered Agent, if changing
Check if applicable	hack 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.

Example: X Change	PT	John Doe		
_				
X Remove	$\underline{\mathbf{v}}$	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change			 	
Add				
Remove				
2) Change		_	 	
Add				
Remove 3) Change				
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4) Change		_		
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5) Change		_		
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	dding additional Art sheets, if necessary).	(Be specific)	-			
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	provides for an exc	nange, reclassif	ication, or cancel	iation of issued s	nares,	
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	8/2/21	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
	8/2/21	
Effective date <u>if applicable</u> : _	(no more than 90 days after amendment file date)	· · · · · · · · · · · · · · · · · · ·
	is block does not meet the applicable statutory filing requirements, this date very Department of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action a	nd shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes east for the amendment(s) re-sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
8/2/21		
Dated	<u> </u>	
Signature	(ha XIXI	
(By	a director, president or other officer – if directors or officers have not been beted, by an incorporator – if in the hands of a receiver, trustee, or other court bointed fiduciary by that fiduciary)	
	Dennis Stewart	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	