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C. GOLDEN SEP 23 2020

Incorporating Services, Ltd.

incserv^o

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com 850-245-6051 FROM

Melissa Stops mstops@incserv.com 850.656.7953

REQUEST DATE 9/21/2020

PRIORITY Routine

OUR REF_#_(Order_ID#) 853983

ORDER ENTITY______AOE OF FLORIDA, INC.

Ī	PLEASE PERFORM THE FOLLOWING SERVICES:
	AOE OF FLORIDA, INC. (FL)

File the attached amendment

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NOTES:				
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43E 00 A.+b.	اسمستند			

\$35.00 Authorized

Email address for annual report reminders: cynthia.duntz@hklaw.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Monday, September 21, 2020 Page 1 of 1

Articles of Amendment to Articles of Incorporation of

2000 - 22 FM 8: 25

(Name of Cornoration	as currently filed with the F	Piorida Dept. of State)
(Documen	nt Number of Corporation (if i	known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Co	rporation adopts the following amendment(s)
A. If amending name, enter the new name of the corp	ogration:	
BOS of Florida, Inc.		
name must be distinguishable and contain the word "corp "Inc.," or Co.," or the designation "Corp," "Inc," o "chartered," "professional association," or the abbrevia	or 'Co' A professional as	The new corporated" or the abbreviation "Corp.," rporation name must contain the word
B. <u>Enter new principal office address. If applicable:</u> Principal office address <u>MUST BE A STREET ADDRE</u>	ESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered new registered agent and/or the new registered offi	office address in Florida, en	iter the name of the
	to nauttat	
Name of New Registered Agent		
	(0)	
	(Florida street address)	
New Ragistered Office Address:	(0)	, Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Register the depointment as registered agent. I am	red Agent: n familiar with and accept the	obligations of the position.
<u></u>		changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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.

	,		
X Remove <u>v</u>	<u>′</u>	Mike Jones	
X Add S	<u>v</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			-
Remove			
5) Change			
Add			
Remove			
O) Change		•	
Add			
Remove			

If amending or adding a (Attach additional sheets,	, if necessary).	(Be specific)	-			
						
						
						
						
						·
						·
		·	 -			
						·
						
	- <u></u>					
f an amendment provide provisions for implemen (if not applicable, ind	es for an exchanting the amend dicate N/A)	ige, reclassificat ment if not con	ion, or cancella ained in the an	tion of issued endment itse	shares. L	
				<u> </u>		
		·····				

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The date of each smendment(s)	September , 2020 adoption:, if other than the				
date this document was signed.					
Effective date if applicable:					
	(no more than 90 days after amendment file date)				
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.				
Adoption of Amendment(s)	(CHECK ONE)				
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder				
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.				
☐ The amendment(s) was/were a must be separately provided for	pproved by the sharcholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):				
"The number of votes ca	st for the amendment(s) was/were sufficient for approval				
by	, n				
	(voling group)				
Camtamb.	16 er , 2020				
Dated					
•					
Signature					
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)				
	George Pfeiffer				
	(Typed or printed name of person signing)				
	Chief Executive Officer				
	(Title of person signing)				