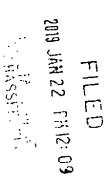
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JAN 22 2019 MARITTON

#### COVER LETTER

NAME OF CORPORATION: LAOTA, OF THE SUNJINC.

DOCUMENT NUMBER: P15000099763 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Wayman W. Favors
Name of Contact Person Registered Agent 2620 Chandalar Lane City/ State and Zip Code Waymantavors @ amail. com
E-mail address: (to be used for further annual report notification) For further information concerning this matter, please call: Wayman W Favors at (239) 699 - 9882

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:

## Mailing Address

S35 Filing Fee

TO: Amendment Section

Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314

□\$43.75 Filing Fee &

Certificate of Status

### Street Address

☐\$43.75 Filing Fee &

(Additional copy is enclosed)

Certified Copy

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

# Articles of Amendment to Articles of Incorporation

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1	01
LAOTA. OF T	HE SUN, INC.
(Name of Corporation as curre	ently filed with the Florida Dept. of State)
P 150000 9976	2
	er of Corporation (if known)
(Document Numbe	if of Corporation (it known)
ursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	hE SUN TNC.  ently filed with the Florida Dept. of State)  or of Corporation (if known)  his Florida Profit Corporation adopts the following amendment(s) to
. If amending name, enter the new name of the corporation:	 <u>└</u>
	The new
me must be distinguishable and contain the word "corpora	
Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." o ord "chartered," "professional association," or the abbreviatio	or "Co". A professional corporation name must contain the
Enter new principal office address, if applicable:	
Principal office address MUST BE A STREET ADDRESS )	
	<del></del>
Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
	<del></del>
. If amending the registered agent and/or registered office a	address in Florida, enter the name of the
new registered agent and/or the new registered office addi	
Name of New Registered Agent Waymay	
21-20 C	nandalar Lane
	a street address)
<del>T-</del> // /	<b>5</b>
New Registered Office Address:	155ee Florida $32311$
	(City) (Zip Code)
lew Registered Agent's Signature, if changing Registered Ag	
hereby accept the appointment as registered agent. I am famili	iar 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 = ChiefExecutive 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>	John Doe			
X Remove	<u>V</u>	Mike Jones			
<u>X</u> Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>			Address
1) Change	$\sqrt{}$	Rassol	ILL, Ahod	B	1518 Jackson St
Add					Fort Myers, Fi
Remove					33901
2) Change		<del>.</del>	<u> </u>		
Add					
Remove					
3 ) Change					
Add					
Remove					
i) Change		<u> </u>			
Add					
Remove					
Channa					
Change Add			<del></del>		
Remove					
Change					
Add					
Remove					

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	
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	<del></del>	
f an amendment provides for an excl	ange, reclassification, or cancellat	ion of issued shares,
provisions for implementing the ame	ndment if not contained in the ame	endment itself:
(if not applicable, indicate N/A)		
		<del></del>

The date of each amendment(s) adoption:	, if other than the
fate this document was signed.	
Effective date if applicable:	<del>.</del>
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirement locument's effective date on the Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the ame by the shareholders was/were sufficient for approval.	endment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"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 slaction was not required.	hareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	nolder
Dated 18 January 2019 Signatury Rule Conserved	
(By a director, president or other officer – if directors or officers have a selected, by an incorporator – if in the hands of a receiver, trustee, or cappointed fiduciary by that fiduciary)	
Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	