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SECRETARY BESTATE TO SEVEN OF CORPORATION

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C MCNAIR

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATIO	n: Suncoa	ast Eteva	for Compar	ly, Inc.
DOCUMENT NUMBER: _				,, –
The enclosed Articles of Ame	endment and fee are su	bmitted for filing.		
Please return all corresponder	nce concerning this ma	tter to the following:		3 2 3
7	-wis Tim	-evlZ Name of Contact Person		APR 26
	uncoast	Eteuctor Firm/Company	Company,	Ince see
	46 NW-	12 Aug.		
	liami A	Address 33166 City/ State and Zip Cod	ಆ	
Luig	Sasunco	astelevato sed for future annual report	notification)	
For further information conce	rning this matter, pleas	se call:		
Usuatt Rode Name of Cont	igulz acı Person	at (30 S Area Co	de & Daytime Telephone Num	ynber
Enclosed is a check for the fo	Howing amount made	payable to the Florida Depa	artment of State:	
	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Agendment Division of P.O. Box 6	t Section Corporations 327	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

Articles of Amendment to Articles of Incorporation

_	of	
Suncoast Etevat	tor Company, Ir	K. 3 1
(Name of Corpora	tion as currently filed with the Florida	Dept. of State)
P16-00000 241	11	Dept. of State)
(Docu	ument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floridate Articles of Incorporation:	da Statutes, this Florida Profit Corporation	on adopts the following amendment
A. If amending name, enter the new name of the	corporation:	,
		The new
name must be distinguishable and contain the wa "Corp.," "Inc.," or Co.," or the designation "Cor vord "chartered," "professional association," or th	rp, " "Inc," or "Co". A professional cor	orporated" or the abbreviation poration name must contain the
B. Enter new principal office address, if applicab		
Principal office address <u>MUST BE A STREET AD</u>	<u>DDRESS</u>)	
	-	· · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Be	<u>(OX</u>)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered Name of New Registered Agent		name of the
	(Florida street address)	
Along Booking and LOFFine Chilanan		Clorida
New Registered Office Address:	(City)	, Florida (Zip Code)
•		
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		ttions of the position.
- Sin	mature of New Registered Agent if chang	

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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
l) Change	5D	Judith Godinez	
Add			Miami PL 33164
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
ACCOUNTS AND		•	
<i>δ</i>) Change		_ ·	
Add		,	
Remove			Ş

E. If amending or adding additional Articles, e (Attach αdditional sheets, if necessary). (Be	enter change(s) here: specific)
	100 to 10
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o Planosido — despuis a compression de la compression della compre	
-	
F. If an amendment provides for an exchange, provisions for implementing the amendmen (if not applicable, indicate N/A)	reclassification, or cancellation of issued shares, nt if not contained in the amendment itself:

The date of each amendment(s) a	doption: 4 17 7	017	, if other than the
date this document was signed.			
Effective date <u>if applicable</u> :	(no more than 90 days after	amendment file date)	
Note: If the date inserted in this l document's effective date on the Do	plock does not meet the applicable statutor epartment of State's records.	ry filing requirements, this date	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of vifficient for approval.	votes cast for the amendment(s)	
	proved by the shareholders through voting geach voting group entitled to vote separate		ut.
"The number of votes cast	for the amendment(s) was/were sufficient f	for approval	
by		"	
	opted by the board of directors without shar	eholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without sharehol	der action and shareholder .	
Dated Signature			
selecte	irector, president or other office — If firect d, by an incorporator — if in the hands of a s ted fiduciary by that fiduciary)	tors or officers have not been receiver, trustee, of other court	
	Juis Timenez (Typed or printed name of pers		
	President (Title of person sig	minu\	
	(Title of person sig	,mng <i>)</i>	