PIG 00005751

(1	Red	questor's Name)	<u> </u>
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((City	//State/Zip/Phon	e #)
PICK-UP		WAIT	MAIL
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Certified Copies		Certificates	s of Status
Special Instructions t	to F	Filing Officer:	· · · · · · · · · · · · · · · · · ·
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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corpor	ations			
NAME OF CORPORA	ATION: Kapma	1001 SUN Ih	<u> </u>	
DOCUMENT NUMBI	er: 12/6000	57523		
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		•
	mike Partei	L_		
-	11110 10110	Name of Contact Perso	n	
_		Firm' Company		_
_		Address		
_	949 Classic	VIEW DR AL	SBURNARIE FL	1382年 景
		City/ State and Zip Cod	c	CRE
-	MngPt509 P E-mail address: (10 be us	Oしたのか sed for future annual report	notification)	TARY Jaina
	concerning this matter, pleas	se call:	notification)	PM 1: 28 OF STAT SSEE, FL
	2 PCI+CL Contact Person		1 625-783 \ de & Daytime Telephone Num	
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:	
S35 Filling Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amen Divisi	ng Address Idment Section Ion of Corporations 30x 6327	Amene Divisio	Address Iment Section in of Corporations centre of Tallahassee	

2415 N. Monroe Streets Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curr	ently filed with the Florida Dept. of	State)
016		
P16000 57523 (Document Numb	per of Corporation (if known)	
	·	
Pursuant to the provisions of section 607,1006, Florida Statutes, tits Articles of Incorporation:	this <i>Florida Profit Corporation</i> adopts	s the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>u</u>	
name must be distinguishable and contain the word "corporation," Inc.," or Co.," or the designation "Corp," "Inc." or "Co" "chartered," "professional association," or the abbreviation "P	A professional corporation bame	The new he abbreviation "Corp.," he must contain the word
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 BON) D. If amending the registered agent and/or registered office and registered agent and/or the new registered office add Name of New Registered Agent		<u>.</u>
Ci	la street address)	
armu.	>	
New Registered Office Address:	, Flc uCity)	orida (Zip Code)
New Registered Agent's Signature, if changing Registered As I hereby accept the appointment as registered agent. I am famili	iar with and accept the obligations of	the position.
Signature of Ne	w Registered Agent, if changing	
Check 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 Joi	<u>hn Doc</u>	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
<u>X</u> Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	NP_	Mangal Potter	949 Classic VIEW DR
Add			RUBURNAAIR FL 33 823
X. Remove			SE 2024
2)Change			SECRETATION 12
Add			1,2 2
Remove 3.) Change			SEE S
Add			Z8 FLIE
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)		
			
		SECRETARY SECRETARY	
			7
		为 P	į
		SEE	
		ASSEE, FL	သ
			-
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,		
provisions for implementing the amo (if not applicable, indicate N/A)	indment if not contained in the amendment itself:		
th moraphical transfer and the sort			
<u></u>			
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	<u> </u>		
			-
			

	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	tno more than 90 days after amendment file date)	
Note: If the date inserted in this bi document's effective date on the De	ock does not meet the applicable statutory filing requirements, this partment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendm ficient for approval.	ient(s)
	roved by the shareholders through voting groups. The following sta- each voting group cutitled to vote separately on the amendment(s):	nement
"The number of votes cast	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
. •	(voting group)	
Dated [] - L	- 2024	
Signature	- 2024 - 37	2024 1 SEC
	rector, president or other officer – if directors or officers have not b , by an incorporator - if in the hands of a receiver, trustee, or other	con EEE 2
	ed fiduciary by that fiduciary)	器 7
	Manger Porter (Typed or printed name of person signing)	SECRETARY OF STALLAHASSEE.
	(Typed or printed name of person signing)	STI STI
	VP	Z8 FATE
	(Title of person signing)	

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