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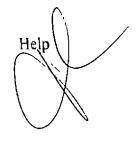
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COR AMND/RESTATE/CORRECT OR O/D RESIGN VG BOETTCHER PROPERTIES CORP.

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TO: Amendment Section

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COVERLETTER

| Division of Con | porations | | | | |
|-----------------------|--|--|--|-------------------|----|
| NAME OF CORPO | RATION: VO BOSTTCHER | PROPERTIES CORP | | | |
| DOCUMENT NUM | IBER: P17000011934 | | | | |
| The enclosed Article | es of Amendment and fee are su | bmitted for filing. | | | |
| Please return all cor | respondence concerning this ma | tter to the following: | | | |
| • | GILVAM F DOS SANTOS | | | | |
| • | | Name of Contact Perso | | | |
| | CERTAY & ACCOUNTEDIC | • | | | |
| • | GFS TAX & ACCOUNTING | | | 2 | |
| | | Firm/ Company | | 2024 JUN 26 | |
| • • • • | 11764 W SAMPLE RD STE | 102 | | | |
| , | | Address | • | z , | • |
| | CORAL SPRINGS FL 33065 | • | | 26 | ~ |
| | | City/ State and Zip Coo | k | · 00 | = |
| : :.• | nicosatera va car (%) | | • | AK II. | 14 |
| | INFO@UFSTAXACCT.CO | red for future annual repor | | : : & | = |
| | B-mail address; (10 oc u | sen for strone summer rebox | t nonnemon) | 5 | |
| For further informs | ion concerning this matter, pless | se call: | | | |
| GILVAM F DOS S | ANTOS | ,954 | 9573244 | | |
| Nam | e of Contact Person | Area C | ode & Daytime Telephone Numb | | |
| Enclosed is a check | for the following amount made | | • | | |
| ™335 Filing Fcc | ☐\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | |
| A D P. | Infilm Address mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314 | Ame Divis The 241: | Address Indiment Section Ition of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 Islanssee, FL 32303 | | |



Articles of Amendment to Articles of Incorporation

| | | of | | |
|---|--|--|-------------------------------|----------------|
| VO BOBTICHER PROPERTIES COR | P | | | |
| (Name | of Corporation as | eperently filed with the Flo | rida Dept. of State) | |
| P17000011934 | | | | |
| | (Document) | lumber of Corporation (if kno | (משכ | |
| Pursuant to the provisions of section 607 its Articles of Incorporation: | .1006, Florida Statu | ates, this <i>Plorida Profit Corp</i> | oracien adopts the following: | amendment(s) t |
| A. If amending name, enter the new p | ame of the corpor | ation: | | |
| | | | | he new |
| name must be distinguishable and contain | the word "corpora | tilon," "company," or "incor | poraled" or the abbreviation | "Corp.," |
| "Inc.," or Co.," or the designation "("chartered," "professional association," | Lorp," "Inc," or ' | "Co". A professional corpo "P A " | protion name must contain t | he word 2 |
| projection accommon, | or are doc/evanor | 1 1 26 | ; | · <u>-</u> |
| B. Rater new principal office address if applicable; | | | - | <u> </u> |
| (Principal office address MUST BE A S | TREAT ANDRESS | | | 26 |
| | | | (| ,, - U |
| | | | <u> </u> | —— 宝 |
| C. Enter new mailing address, if apol | icable: | | | <u> </u> |
| (Malling address MAY BE A POST | OFFICE BOX | | | <u></u> |
| | | | | |
| | | | | |
| • | | | | |
| D. If amending the registered exent as new registered arent and/or the ne | od/or registered of w registered office | fice address in Florida, ent address: | er the name of the | |
| Name of New Registered Agent | High End Accoun | ting Services | | |
| | 919 S. State Road | 7 | | • |
| | a | lorida street address) | | - |
| New Registered Office Address: | Plantation | | Florida 33317 | |
| HEN VERMINISTER STILLE VARIETY. | | (City) | , Florida , Zip | Code) |
| | | | | |
| | | | | |
| New Registered Agent's Signature, if c | nancina Resister | d Agent: | | |
| I hereby accept the appointment as regist | ered agent. I om j | familiar with and accept the | e obligations of the position | |
| | 115 | | | • |

Signature of New Registered Agent, if changing

Check if applicable

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

11 24 000 21 095%

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 | PI | John D | 20 | | | | | | | |
|-------------------------------|-----------|-----------|--------------|---|-----------|-------------|-----------------------|--------------|-------------|--|
| X Remove | ¥ | Mike J | ones | | | | | | | |
| _X Add | <u>sy</u> | Sally S | mith | | | | | | | |
| Type of Action (Check One) | Title | | <u>Name</u> | | | | Address | | | |
| 1) Change | | - | | · | | | | | | |
| Add | | | | | | | | | | 707 |
| Remove | | | | | | | | | ! | 3 |
| 2) Change | | _ | | | | | | | | <u> </u> |
| Add | | | | | | | | | (7) | <u>r</u> |
| Remove 3) Change | | - | | | ** | | | | | |
| Add | | | | | | | | | | - |
| Remove | | | | * | | | | . | | |
| 4) Change | · . | - | | | | | | | | |
| Add | | | | | | | | | | |
| Remove | | | | | | | | | | <u>. </u> |
| 5) Change | | - | | | | | | | | |
| Add | | | | | | | | | <u> </u> | |
| Remove | | | | | | | | <u> </u> | | |
| 6)Change | | - | | | | | | | <u> </u> | |
| Add | | | | | | | | | | |
| Remove | | | | | | | فرمونان وبورون وسائسا | | | |

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| stach additional sheets, if necessary). (Be specific) | | |
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| f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: | | |
| (if not applicable, indicase N/A) | | |
| | | _ |
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| date this document was signed. | ruoption: | | if other than the |
|---|---|--|---|
| Effective date f applicable: | | | |
| | (no more than 90 days after a | mendment file date) | |
| Note: If the date inserted in this document's effective date on the I | block does not meet the applicable statutor epartment of State's records. | y filing requirements, this date w | vill not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | | |
| ■ The amendment(s) was/were ac action was not required. | lopted by the incorporators, or board of direct | tors without shareholder action a | nd shareholder |
| The amendment(s) was/were ac by the shareholders was/were | opted by the shareholders. The number of vufficient for approval. | oles cast for the amendment(s) | |
| must be separately provided fo | proved by the shareholders through voting greach voting group entitled to vote separate to the amendment(s) was/were sufficient f | ly on the amendment(s): | 2024 JUN 26 AM 11:5 |
| selecte | irector, president or other officer – if director, by an incorporator – if in the hands of a reted fiduciary by that fiduciary) | ors or officers have not been eceiver, trustee, or other court | |
| | GILVAM F DOS SANTOS | | |
| _11/ 3 | (Typed or printed name of perso | n signing) () () () () () () () () () (| |
| | (Title of person signing) | The second of th | |