P17000017191

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SECRETARY OF STATE
TALLAHASSEE, FI

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COVER LETTER ..

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORA	TION: CAMP DAVID S	TUDIOS INC			
DOCUMENT NUMBE	R:P17000017191				
The enclosed Articles of	Amendment and fee are su	bmitted for filing.			
Please return all correspo	ondence concerning this ma	tter to the following:			
		DAISY GROVAS			
_		Name of Contact Person	n		
_		Firm/ Company	<u></u>		
	8040 SW 18th TERR				
_	_				
_		_			
City/ State and Zip Code daisygrovas@gmail.com E-mail address: (to be used for future annual report notification)					
_	E-mail address: (to be us	sed for future annual report	notification)	SEC SEC	
For further information of	concerning this matter, plea	se call:		PILL SAHID: 15 SECRETARY OF STATE SECRETARY OF STATE SECRETARY OF STATE	
DAISY GROVAS		at (210-0889	ASS H	
Name of	Contact Person	Area Co	de & Daytime Telephone Num	ber FS 5	
Enclosed is a check for t	he following amount made	payable to the Florida Dep	artment of State:	FATE 15	
□ \$35 Filing Fee	S43.75 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)		
Amend	ng Address Iment Section on of Corporations	Ameno	Address Iment Section on of Corporations		

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

CAMP DAVID STUDIOS INC

(Name of Corporation as currently filed with the Florida Dept. of State) P17000017191 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp., "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the words "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (Citv) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position,

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.

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 Doc, 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	VP	KELVIN GOVENDER	7845 SW 56 ST UNIT A-202
Add			MIAMI, FL 33155
X Remove			
2) Change			HARV
Add			
Remove 3) Change			TAIE -
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			<u></u> _
Remove			

The date of each amendment(s) adoption: _		if other t	han 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 block does document's effective date on the Department of	not meet the applicable statutory filing requirements, this date will a of State's records.	not be listed	l as the
Adoption of Amendment(s) (<u>C</u>	HECK ONE)		
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators, or board of directors without shareholder action and s	hareholder	
■ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amendment(s) r approval.		
"The number of votes cast for the am by	the shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s): endment(s) was/were sufficient for approval oting group) /2023 / / / / / / / /	2023 MAY 15 AM 10: 15 SECRETARY OF STATE	
	(Typed or printed name of person signing)		
	(Title of person signing)		