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# **COVER LETTER**

<b>TO:</b> Amendment Section Division of Corporations	•			
NAME OF CORPORATION	: <u>Dane</u>	C 5h	April Busine	SS
DOCUMENT NUMBER:				
The enclosed Articles of Amend	dment and fee are su	bmitted for filing.		
Please return all correspondence	concerning this ma	tter to the following:		
	Üh	Name of Contact Person	M/C	<del></del>
P	. D. BOY	Firm/ Company 7 SU 9724 Address		<del></del>
_ W.	mil C	City/ State and Zip Cod		
E-m	CStanc ail address: (to be us	SKCFC/LC/ClO ed for future annual report	notification)	
For further information concern	ing this matter, pleas	se call: 407 -	395-2136	, Buspess
Name of Contact	Person Person	at ( U ) Area Co	- 395- Z136 <u>572- Z756</u> de & Daytime Telephone Numerutment of State:	ber Cell
Enclosed is a check for the follo	wing amount made p	payable to the Florida Depa	urtment of State:	() leas though
	3.75 Filing Fee & rtificate 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)	
Mailing Addr	ess	Street .	Address	

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

Commence of the commence of

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to

# Articles of Incorporation

Ocha c sharp	· business The		
(Name of Corporation as currently	filed with the Florida Dept. of State)	· ·····	
217000052831			
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following a	amendment(s) to	
A. If amending name, enter the new name of the corporation:	Foundation Inc		
		The new	
name must be distinguishable and contain the word "corporation," "co". Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."			
B. Enter new principal office address, if applicable:	741 COKE AVE		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	MIDUTAL GARDEN FL		
	25087	<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. BOX 784924		
	LUMITH CAMPIN FI		
	2 177 8	<u> </u>	
	39118		
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:			
Name of New Registered Agent			
	_	- 3	
(Florida stre	ret address)	702 <b>9</b>	
New Registered Office Address:	, Florida		
(	(Zip Col	<u>#3</u>	
New Registered Agent's Signature, if changing Registered Agent:		PH 1:51	
I hereby accept the appointment as registered agent. I am familiar w	rth and accept the obligations of the position.	20	
S: CV n	14		
Signature of New Re	gistered Agent, if changing		
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	<u>PT</u> <u>John</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	PTO	Chayl D. Shape	741 COILE AVE
Add  Remove		00	Norter Garden F
2) Change Add		Dwarre Shape SK	JYI COKE ANE W. G. PL 3478
Remove 3) Change			
Add Remove			
4) Change	<del></del>		
Add Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			

ttach <i>additior</i>	adding addition all sheets, if neces.	sary). (Be spe					
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an amendme	nt provides for a	n exchange, rec	lassification	or cancellation	n of issued cha	rac	
rovisions for	implementing th	e amendment i	f not contain	ed in the amen	dment itself:	103,	
(if not app	licable, indicate N	VA)					
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	nt file date)
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing a document's effective date on the Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors with action was not required.	nout shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes case by the shareholders was/were sufficient for approval.	for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. If must be separately provided for each voting group entitled to vote separately on the	The following statement camendment(s):
"The number of votes east for the amendment(s) was/were sufficient for appro	val
by The China Former pro-	
Dated07/15/2020	
Signature  (By a director, president or other officer – if directors or off selected, by an incorporator – if in the hands of a receiver, appointed fiduciary by that fiduciary)	icers have not been trustee, or other court
(Typed or printed name of person signin	17N -
(Title of person signing)	P
(the or person signing)	