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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO           | RATION: TEMPLAR INC  |  |   |
|-------------------------|--|--|---|
|                         | BER: P17000055822  |  |   |
|                         | s of Amendment and fee are su  | bmitted for filing.  |   |
| Please return all corre | espondence concerning this ma  | tter to the following:   |   |
|                         | PAUL WONG  |  |   |
|                         | -  | Name of Contact Person   | n   |
|                         | TEMPLAR INC  |  |   |
|                         |  | Firm/ Company  | <del></del>   |
|                         | 1475 JERSEY STREET NE  |  |   |
|                         |  | Address  |   |
|                         | LAKE PLACID, FLORIDA   | 33852  |   |
|                         |  | City/ State and Zip Cod  | e   |
|                         | paulwong60@gmail.com   |  |   |
|                         | E-mail address: (to be us  | sed for future annual report                                       | notification)   |
| For further information | on concerning this matter, plea-   | se call:   |   |
| FION WONG               |  | at ( <u>863</u>  | 633-8616  |
| Name                    | of Contact Person  |  | de & Daytime Telephone Number   |
| Enclosed is a check f   | or the following amount made   | payable to the Florida Dep   | artment of State:   |
| □ \$35 Filing Fee       | □\$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)    |
| An<br>Div<br>P.C        | iling Address<br>endment Section<br>ision of Corporations<br>b. Box 6327<br>lahassee, FL 32314 | Ameno<br>Divisio<br>The C  | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 |

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

2022 MAR 30 AM 11:58

| TEMPLAR INC   |                              | 25.   | RETUNY OF STATE       |
|---|------------------------------|---|-----------------------|
| (Name o   | f Corporation as current     | ly filed with the Florida Dept. of State  | J-LAMASSEE, FL        |
| 17000055822   |                              |   |                       |
|   | (Document Number             | of Corporation (if known)   |                       |
| ursuant to the provisions of section 607. s Articles of Incorporation:  | 1006, Florida Statutes, this | Florida Profit Corporation adopts the f   | following amendment(s |
| . If amending name, enter the new na  | ame of the corporation:      |   |                       |
| EMPLAR OF HIGHLANDS INC   |                              |   | The new               |
| ame must be distinguishable and contain<br>Inc.," or Co.," or the designation "C<br>chartered," "professional association." | Corp," "Inc," or "Co".       | company," or "incorporated" or the abl<br>A professional corporation name must<br>" | breviation "Corp.,"   |
| E-A   |                              | N/A   |                       |
| Enter new principal office address, Principal office address MUST BE A ST   |                              |   | <u> </u>              |
|   | ,                            |   |                       |
|   |                              |   |                       |
|   |                              |   |                       |
| . Enter new mailing address, if appli<br>(Mailing address MAY BE A POST of  |                              | N/A   |                       |
|   | <u> </u>                     |   |                       |
|   |                              |   |                       |
|   |                              |   | <u> </u>              |
| . If amending the registered agent an   | d/or registered office add   | tress in Florida, enter the name of the   |                       |
| new registered agent and/or the new   |                              |   |                       |
| Name of New Registered Agent  | N/A                          |   |                       |
| Nume of New Registered Agent  |                              |   | <del></del>           |
|   | /Elouida a                   | reet address)   |                       |
|   | N/A                          | reet addressy   |                       |
| New Registered Office Address:  |                              | , Florida   | Cr. C. L.             |
|   |                              | (City)  | (Zip Code)            |
|   |                              |   |                       |
| ew Registered Agent's Signature, if cl  | hanging Registered Agen      | <u>:</u>  |                       |
| hereby accept the appointment as registe  | ered agent. I am familiar    | ==<br>with and accept the obligations of the po                                     | sition.               |
|   |                              |   |                       |
|   |                              |   |                       |
| <del></del>   | Ci CN                        |   |                       |
|   | Signature of New I           | Registered Agent, if changing   |                       |
| heck if applicable  |                              |   |                       |

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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)

Example:

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.

| X Change                      | <u>PT</u>    | John Do  | <u>oe</u> |                 |
|-------------------------------|--------------|----------|-----------|-----------------|
| X Remove                      | <u>v</u>     | Mike Jo  | ones      |                 |
| X Add                         | <u>sv</u>    | Sally Sn | nith      |                 |
| Type of Action<br>(Check One) | <u>Title</u> |          | Name      | <u>Addres</u> s |
| 1) Change                     | <del></del>  | _        |           |                 |
| Add                           |              |          |           |                 |
| Remove                        |              |          |           |                 |
| 2) Change                     |              | _        |           |                 |
| Add                           |              |          |           |                 |
| Remove 3) Change              |              | _        |           |                 |
| Add                           |              |          |           |                 |
| Remove                        |              |          |           |                 |
| 4) Change                     |              | _        |           |                 |
| Add                           |              |          |           |                 |
| Remove                        |              |          |           |                 |
| 5) Change                     |              | _        |           |                 |
| Add                           |              |          |           |                 |
| Remove                        |              |          |           |                 |
| 6) Change                     |              | _        |           |                 |
| Add                           |              |          |           |                 |
| Remove                        |              |          |           |                 |

| E. If amending or adding additional Arti-<br>(Attach additional sheets, if necessary). | cles, enter change(s) here: (Be specific)  |
|--|--|
| N/A  |  |
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| provisions for implementing the ame  | nange, reclassification, or cancellation of issued shares,  ndment if not contained in the amendment itself; |
| (if not applicable, indicate N/A)  |  |
| N/A  |  |
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|   | 3/25/2022   |                                    |
|---|---|------------------------------------|
| he date of each amendment(s) ado  | otion:  | , if other than th                 |
| ate this document was signed.   |   |                                    |
|   |   |                                    |
| ffective date <u>if applicable</u> :  |   |                                    |
|   | (no more than 90 days after amendment file date)  |                                    |
| lote: If the date inserted in this blo<br>ocument's effective date on the Department. | ck does not meet the applicable statutory filing requirements, rtment of State's records.   | this date will not be listed as th |
| doption of Amendment(s)   | (CHECK ONE)   |                                    |
| The amendment(s) was/were adopt action was not required.                              | ed by the incorporators, or board of directors without sharehold  | ler action and shareholder         |
| The amendment(s) was/were adopt<br>by the shareholders was/were suff                  | ed by the shareholders. The number of votes cast for the amend<br>cient for approval.   | dment(s)                           |
| must be separately provided for ea  | ved by the shareholders through voting groups. The following ch voting group entitled to vote separately on the amendment(s   |                                    |
|   | r the amendment(s) was/were sufficient for approval   |                                    |
| by N/A  |   |                                    |
|   | (voting group)  |                                    |
|   |   |                                    |
| 3/25/2022   |   |                                    |
| Dated   |   |                                    |
| Signature Coul  | ( Down  |                                    |
| (By a dire<br>selected,   | ctor, president on other officer - if directors or officers have not<br>by an incorporator - if in the hands of a receiver, trustee, or oth<br>fiduciary by that fiduciary) |                                    |
| P   | AUL WONG  |                                    |
| _   | (Typed or printed name of person signing)   | ****                               |
| P   | RESIDENT  |                                    |
| _   | (Title of person signing)   | <del> </del>                       |