## P18000011379

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2021 OCT -7 AM 7:10 SECRETARY OF SHOTE

2021 OCT - 7 AM 7:

## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Dichid Properties Inc DOCUMENT NUMBER: P18000011379
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Scott Rinden
Name of Contact Person
Orchid Properties Inc
_
17990 Via Bella Mare lane
Miromartales FL 33913
City/ State and Zip Code
Srinden@ gradicon
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Wendy II vie at (239) 248-10655
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status    S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)   Certified Copy (Certified Copy
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment

Articles of Incorporation

FILED

2021 OCT -7 AM 7: 10

A: : .	of .	2021 UCT - 7 AM 7
Orchid P	roperties Inc	SECRETARY OF ST
(Name of Corporatio	n as currently filed with the Florida Dept.	of State)
P180	000011379	
(Docume	ent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation add	opts the following amendment(s) to
A. If amending name, enter the new name of the con	rporation:	
name must be distinguishable and contain the word "cor" Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	Of (0) d protectional assumation was	The new or the abbreviation "Corp.," me must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD)	RESS )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	17990 Via 1 Miromar La	Bellamage Ln Jue 192.33913
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	d office address in Florida, enter the name Nice address:	of the
Name of New Registered Agent		
<del></del>	(Florida street address)	
New Project LOW	() (i)/(dd Street ddaress)	
New Registered Office Address:	(City)	Florida
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I de	tered Agent: un familiar with and accept the obligations o	of the position.
Signatu	re of New Registered Agent, if changing	<del></del>
Check if applicable	gggggggg	

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)

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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	D	JeffreyPaul Trefenbuch	36381 STamiemiTr
Add Remove 2) Change Add	D	Scott Rinder	300 Benita Springs, FL 34134 17990 Va Bellamare La Miromar Lahres, FL 339
Remove Change			
Add Remove 4) Change Add			
Remove  5) Change Add	<u></u>		
Remove 6) Change			
Add Remove			

	y). (Be specific)			
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			of the same	
F. If an amendment provides for an	exchange, reclassifica	tion, or cancellation	of issued shares,	
provisions for implementing the	amendment if not cor	tion, or cancellation	of issued shares, Iment itself:	
provisions for implementing the	amendment if not cor	tion, or cancellation stained in the amen	of issued shares, Iment itself:	
F. If an amendment provides for an provisions for implementing the (if not applicable, indicate N/2)	amendment if not cor	tion, or cancellation Itained in the amen	of issued shares, Iment itself:	
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F. If an amendment provides for an provisions for implementing the (if not applicable, indicate N/A	amendment if not cor	tion, or cancellation stained in the amen	of issued shares, Iment itself:	
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provisions for implementing the	amendment if not cor	tion, or cancellation	of issued shares, dment itself:	
provisions for implementing the	amendment if not cor	tion, or cancellation itained in the amen	of issued shares, dment itself:	

The date of each amendment(s) as date this document was signed.	if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
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 amendment(s) fficient for approval.
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
musi ve separmety proviaca jor	each voting group entitled to vote separately on the amendment(s):
musi ve separmety proviaca jor	for the amendment(s) was/were sufficient for approval
"The number of votes cast	each voting group entitled to vote separately on the amendment(s):
"The number of votes cast by	for the amendment(s) was/were sufficient for approval  (voting group)
"The number of votes cast	for the amendment(s) was/were sufficient for approval  (voting group)
by	for the amendment(s) was/were sufficient for approval  (voting group)  (voting group)
Dated Oct 4, 20 Signature	for the amendment(s) was/were sufficient for approval  (voting group)
The number of votes cast by  Dated Oct 4, 20  Signature	(voting group)  (voting group)
Dated Oct 4, 20 Signature	(voting group)