## P18000011666

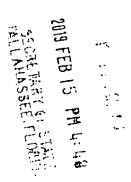
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Naples Business Holding Corp. DOCUMENT NUMBER: P18000011666 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Renee Hahn Name of Contact Person Firm/ Company 6952 Burnt Sienna Circle Address Naples, FL 34109 City/ State and Zip Code renee@reneedhahn.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Callhan Soldavini at (239 ) 398-4831

Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment

## to Articles of Incorporation of

Naples Business Holding Corp.			100		
(Name	of Corporation as curren	tly filed with the Florida Dept. of State)	350 0		
P18000011666			- 63 B		
	(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation adopts the fo	llowing amendme		
A. If amending name, enter the new n	ame of the corporation:				
Renee Hahn, P.A.			Th		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations of the control of t	nation "Corp," "Inc," or	on," "company," or "incorporated" or "Co". A professional corporation name "P.A."	The new the abbreviation must contain the		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		6952 Burnt Sienna Circle			
		Naples, FL 34109			
C. Enter new mailing address, if appl		6952 Burnt Sienna Circle			
(Mailing address MAY BE A POST OFFICE BOX)		Naples, FL 34109			
D. If amending the registered agent an new registered agent and/or the ne			<del></del>		
Name of New Registered Agent	Renee Hahn				
Nume of New Registered Agent	6952 Burnt Sienna Circle		<del></del>		
		reet address)	<del></del>		
New Registered Office Address:	Naples	ŕ	109		
		(City)	(Zip Code)		
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agentered agent. I am familiar		, ,		
	Signature of New 1	Registered Agent, if changing			

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 = ChiefExecutive 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>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	Р		Brigid Soldavini-Clapper	5455 Jaeger Road
Add				Naples, FL 34109
X Remove				
2) Change	P		Renee Hahn	6952 Burnt Sienna Circle
X Add				Naples, FL 34109
Remove				
3) Change		<u> </u>		
Add			· ·	
Remove				
4) Change	<u></u>			
Add				
Remove				
5) Change				
Add				
Remove				
O Change			·	
6) Change				
Remove				

(Attach additional sheets, if necessary)	ticles, enter char . (Be specific)	nge(s) here:			
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If an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	hange, reclassifi endment if not c	ication, or cancel contained in the a	lation of issued sh mendment itself:	aares,	
		<del></del>		<del></del>	

The date of each amendment(s) adoption:, if other than 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 not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 1/30/19 Signature Peru & New Concer D. H.
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Renee Hahn
(Typed or printed name of person signing)
President of Renee Hahn, P.A.
(Title of person signing)