P1800033747

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SECRETARY OF STATE
TALLAHASSEE, FLORIG

C. GOLDEN 49R 3 0 2018

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: H1/2EF BR33D, INC **DOCUMENT NUMBER:** P18000032747 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **RAWLE GREENIDGE** Name of Contact Person H1/2LF BR33D, INC Firm/ Company 7378 W. ATLANTIC BLVD #292 Address MARGATE, FL 33063 City/ State and Zip Code 0.5BR33D@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RAWLE GREENIDGE 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 enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED 2010 APR 27 PM 3: 37

SECRETARY OF STATE

(Name of Corporation as currently filed with the Florida Dept. of State) P18000032747 (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: N/A 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 word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable; N/A (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:

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent

New Registered Office Address:

H1/2LF BR33D, INC

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

(Florida street address)

(City)

, Florida

(Zip Code)

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 <math>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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change	M	Dion Williams	6184 Laurel Lane
Add			Unit C
X Remove			Tamarac, FL 33319
2) Change	М	Aduke Young	6184 Laurel Lane
Add			Unit C
X Remove			Tamarac, FL 33319
3) Change		_	
Add			
Remove			
4) Change			•
Add	- , , , , , , , , , , , , , , , , , , ,		
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) N/A				
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,				
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)				
N/A				

	N/A	
The date of each amendment(s	adoption:	, if other than the
date this document was signed.		
	/21/2018	
Effective date <u>if applicable</u> : _	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirement Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the ame sufficient for approval.	ndment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sl	nareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareh	older
4/21/20 Dated Signature	8	
	a director, president or other officer - if directors or officers have	not been
	cted, by an incorporator - if in the hands of a receiver, trustee, or o	ther court
app	pinted fiduciary by that fiduciary)	
	RAWLE GREENIDGE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	·