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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	CARBUN	1E24 MANAGER	AENT INC
DOCUMENT NUMBER:		00047496	
The enclosed Articles of Amendme	nt and fee are su	bmitted for filing.	
Please return all correspondence co	ncerning this ma	tter to the following:	
E-mail :	7540 PLAM CDEF	O74710N CL City/ State and Zip Cod  SUNEHEUTH 24  sed for future annual report	2007 Suite #2 33317 e Gmail. Com
MARRY ANN SCH	colden	at ( 954	de & Daytime Telephone Number
Name of Contact Pe	rson	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following	ig amount made	payable to the Florida Dep	artment of State:
	5 Filing Fee & icate 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 Address Amendment Sect Division of Corpo P.O. Box 6327 Tallahassee, FL 3	ion prations	Ameno Divisio 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	2022
CORPUNEZA	4 MONAGENEUT, INC	
(Name of Corporation as	s currently filed with the Florida Dept, of State)	20
P18000	XX47496	
(Document)	Number of Corporation (if known)	70.
Pursuant to the provisions of section 607.1006. Florida Statits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the fol	lowing amendment(s)
A. If amending name, enter the new name of the corpor	ration:	
HC INTEGRATE	1 PEVENUE SOLUTIONS IN	O. The new
name must be distinguishable and contain the word "corpor" Inc.," or Co.," or the designation "Corp." "Inc." or "chartered," "professional association," or the abbreviation	ration," "company," or "incorporated" or the abbre "Co". A professional corporation name must c	eviation "Corp.,"
B. Enter new principal office address, if applicable:	1317 EXCENATED D	RIVE
(Principal office address MUST BE A STREET ADDRES	<del></del>	<u> </u>
	ORIANDO, FL 3280	14
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered o new registered agent and/or the new registered office		
Name of New Registered Agent		<del></del>
	Florida street address)	
New Registered Office Address:	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am		tion.
Signature	of New Registered Agent, if changing	<u></u>

Check if applicable

<sup>☐</sup> 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 John Do</u>	<u>ec</u>	
X Remove	<u>V</u> <u>Mike Jo</u>	nes	
X Add	<u>SV</u> <u>Sally Sn</u>	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>P</u>	EMMA GONZNEZ	3160 Sw 132 ane
Add			MIRAMAR, SI BESON
X_ Remove			
2) Change	PéVP	AGNA JONES	3160 SW 132 ane
Add	•		MILAMOR, FL. 38800
Remove 3 ) Change			0307
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<u></u>		
Add			
Remove			
6) Change			
Add			
Remove			-

tach additional sheets, if neces	sary). (Be specific)	
NA		
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an amendment provides for:	in exchange, reclassification, or cancellation of	issued shares,
rovisions for implementing t	e amendment if not contained in the amendme	ent itself:
(if not applicable, indicate i	VA)	
AGN A GONES	100°/0 shares.	
2010 pr 10100)	100 10 steales.	
<del></del>		

The date of each amendment(s) adoption: date this document was signed.	July 1, WVL	, if other than the
Effective date if applicable:	Lely 1 2022	
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not document's effective date on the Department of S	meet the applicable statutory filing requirements, this State's records.	date will not be listed as the
Adoption of Amendment(s) (CHE	CCK ONE)	
The amendment(s) was/were adopted by the ir action was not required.	acorporators, or board of directors without shareholder a	ction and shareholder
☐ The amendment(s) was/were adopted by the sl by the shareholders was/were sufficient for ap	hareholders. The number of votes cast for the amendme oproval.	nt(s)
must be separately provided for each voting g	shareholders through voting groups. The following state group entitled to vote separately on the amendment(s):	ement 77.1.1
"The number of votes cast for the ameno	fment(s) was/were sufficient for approval	- ~3 
by		JUL 20
(votin	g group)	JL 20 PH 2: 23
1		PH.
Dated July B,	2022	ر 104 5:
Signature	Tokin (Jones)	
	ent or other officer – if directors or officers have not bee porator – if in the hands of a receiver, trustee, or other copy that fiduciary)	
	ASKIA BONES	
(T	yped or printed name of person signing)	
***	PRESIDENT & PRESIDENT	
(1)	itle of person signing)	