Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H200004197323)))



H200004197323ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations Fax Number : (850)617-6380 From: Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (614)280-3338 : (954)208-0845 \*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\* Email Address: COR AMND/RESTATE/CORRECT OR O/D RESIGN **EVERLEIGH CAPITAL INC** Certificate of Status Certified Copy I Page Count 05 Estimated Charge \$43.75

Electronic Filing Menu

Corporate Filing Menu

DEC 0 1 5050

19542080845

From; Ranae McGraw

## Articles of Amendment to Articles of Incorporation of

EverleighCapitalInc.			
(Name o	of Corporation as curre	ntly filed with the Florida Dept. of State)	
P18000087282			
	(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation adopts the following amendme	:nt(s) to
A. If amending name, enter the new na	ame of the corporation:		
Everleighluc.		The new	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	lorp," "Inc." or "Co".	"company," or "incorporated" or the abbreviation "Corp.,' A professional corporation name must contain the word	•
R. Enter now principal office address	if annticable:	N/A	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		N/A	
		N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
		N/A	
		N/A	
D. If amending the registered agent ar new registered agent and/or the new		Idress in Florida, enter the name of the	
Name of New Registered Agent	N/A	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	!
Maine of New Registered Agent	N/A		i
	tFlorida	street address)	
None Danie and 1000 at the land	N/A	Plorida N/A	
CENTRESIDENCE OFFICE STREET		(City) (Zip Cock)	
New Registered Office Address:  New Registered Agent's Signature, if e I hereby accept the appointment as regist	hanging Registered Age		
	Signature of New	Registered Agent, if changing	
Check if applicable  ☐ The amendment(s) is/are being filed p			

Te: 18506176380 Page: ≯of 6 2020-12-08 15 00.29 CST 19542080845 From: Ranae McGraw

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	PT	John Doe			
X Remove	<u>V</u>	Mike Jones			
<u>X</u> Add	$\underline{SV}$	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>		Address	
1) Change					
Add					
Remove					
2) Change				<del>-</del>	<u>-</u> .
Add					
Remove 3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add			·		
Remove					
6) Change				<del></del>	
Add			-	-	
Remove					

١	reets, if necessary).	(Be specific)				
•						
<u>-</u>			•	•		•
<del></del> .						
		<u> </u>		<u> </u>		
<del></del>		<del></del>	<del></del>	· · · · · · · · · · · · · · · · · · ·		
						<del></del>
·						
	<del></del>					
		····	····································			
	<del></del>					<del></del>
			· ·		··· · · · · · · · · · · · ·	
				<del> </del>		
It an amendment p	rovides for an exch lementing the ame	nange, reclassific	ation, or cancell intrined in the a	ation of issued sh mendment itself:	ares,	
(if not applica-	ole, indicate N/A)	TICH THE TOTAL OF	mana mana m	Methodic III (Marie III)		
٨						
<del></del>						
				•*		

date this document was signed.

19542080845 From: Ranae McGraw the

Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this I document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed as epartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☑ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes case	for the amendment(s) was/were sufficient for approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)
Signature	1 DEC 2020 UC Ma
selecte	tirector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	DonaldDeubler,Jr
	(Typed or printed name of person signing)
	President
	(Title of person signing)