## P1800089396

| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
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C. GOLDEN NOV - 5 2018

## COVER LETTER

| TO: Amendment Sectio<br>Division of Corpor                         |   |   |  |  |  |
|--|---|---|--|--|--|
| NAME OF CORPORA  | TION:                                       | 79 North L<br>089396  | ste Drive Inc  |  |  |
|  |   |   |  |  |  |
| The enclosed Articles of   | (Amendment and fee are suf                  | bmitted for filing.   |  |  |  |
| Please return all corresp  | ondence concerning this mat                 | ter to the following:   |  |  |  |
| _  | Nebi Bra                                    | Name of Contact Person  | 1  |  |  |
| _  | 132 5+0                                     | anhope G  | rde  |  |  |
| _  |   | Address   |  |  |  |
|  | Nobles                                      |   | /  |  |  |
| _  | 11915                                       | FL 34104<br>City/ State and Zip Code                              | 2  |  |  |
| E-mail address: (to be used for future unamal report notification) |   |   |  |  |  |
| For further information  | concerning this matter, pleas               | se call:  |  |  |  |
| Nebi Bra   | ka  | ar ( 239  |  |  |  |
| Name of  | Contact Person .                            | Area Co   | de & Daytime Telephone Number  |  |  |
| Enclosed is a check for  | the following amount made p                 | payable to the Florida Depa                                       | irtinent of State:   |  |  |
| □ \$35 Filing Fee  | □\$43.75 Filing Fee & Certificate of Status | □S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |  |  |
|  | ng Address                                  | Street  | Address  |  |  |
|  | dment Section                               |   | lment Section<br>on of Corporations  |  |  |
|  | on of Corporations<br>Box 6327              |   | n of Corporations<br>Building  |  |  |
|  | nassee, FL 32314                            |   | Executive Center Circle  |  |  |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

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2018 NOV -5 AM 8: 22

| 279 North Lake  | Drive:                                     | EnC                         | <del></del>                           | <del>SuitETARY o</del>         | <del>. 5</del> 7, |
|---|--|-----------------------------|---------------------------------------|--------------------------------|-------------------|
| (Name of Corpora  |  | led with the Florida Dep    | t. of State) A                        | LAHASSEE.                      | FI.0!             |
| P180000   | 89396                                      |                             | · · · · · · · · · · · · · · · · · · · |                                |                   |
| (Docu   | ament Number of Co                         | rporation (if known)        |                                       |                                |                   |
| Pursuant to the provisions of section 607,1006, Florints Articles of Incorporation:   | ida Statutes, this <i>Flo</i>              | rida Profit Corporation w   | dopts the follow                      | ring amendment                 | (s) to            |
| A. If amending name, enter the new name of the  | corporation;                               |                             |                                       |                                |                   |
|   |  |                             |                                       | The new                        |                   |
| name must be distinguishable and contain the we<br>"Corp.," "Inc.," or Co.," or the designation "Cor<br>word "chartered," "professional association," or th | rp." "Inc," or "Co                         | ". A professional corpor    | orated" or the ation name mu          | abbreviation<br>st contain the |                   |
| B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET AL</u>   | ole: ,<br>ODRESS )                         |                             |                                       |                                |                   |
|   |  |                             |                                       |                                |                   |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B  | <u>30X</u> )                               |                             |                                       |                                |                   |
|   |  |                             |                                       |                                |                   |
| D. If amending the registered agent and/or regist<br>new registered agent and/or the new registere  | tered office address<br>ed office address: | in Florida, enter the na    | me of the                             |                                | ٠,                |
| Name of New Registered Agent  |  |                             |                                       |                                |                   |
| syame of New Registered Agein   |  |                             |                                       |                                |                   |
| <del></del>   | (Florida street                            | address)                    |                                       |                                |                   |
| Sim Dominson of China Addresses   |  |                             | . Florida                             |                                |                   |
| New Registered Office Address:  | (C)  | ώ)                          |                                       | lip Code)                      |                   |
| New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent   | Registered Agent: t - I am familiar wit    | h and accept the obligation | ns of the positio                     | n                              |                   |
|   |  |                             |                                       |                                |                   |
|   | ionature of New Rea                        | istered 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.

| X Remove   Y   Mike Jones     X Add   SV   Sally Smith     Type of Action (Check One)     Change   YP   Eldorada Broka     Address     Add   Remove     Change   S   Nebi Braka     Add   Remove     Add     Remove   Remove     Add     Add     Add     Remove     Add     Add | Example:<br><u>X</u> Change | <u>PT</u> | John Doe       |                     |
|---|-----------------------------|-----------|----------------|---------------------|
| Type of Action (Check One)  1) Change   | X Remove                    | <u>V</u>  | Mike Jones     |                     |
| ICheck One)  1)Change   | <u>X</u> Add                | <u>sv</u> | Sally Smith    |                     |
|   |                             | Title     |                |                     |
|   | 1) Change                   | √ p       | Eldorada Broka | 132 Stanhope        |
| 2) Change   |                             |           |                |                     |
|   | Remove                      |           |                | FL 34104            |
|   | 2) Change                   | 5         | NEbi Braka     | 132 Stanbope Circle |
| 3 ) Change Add  | _ <b>≯=</b> _ ∧dd           |           |                | Naples FL 34104     |
| AddRemove  4)ChangeAddRemove  5)ChangeAddRemove  6)ChangeAddAdd   |                             |           |                |                     |
| Remove  | 3 ) Change                  |           |                |                     |
| 4) Change   | Add                         |           |                |                     |
| Add   | Remove                      |           |                |                     |
| Remove  | 4) Change                   |           |                |                     |
| 5) Change   | Add                         |           |                |                     |
| Add   | Remove                      |           |                |                     |
|   | 5) Change                   |           | <u> </u>       |                     |
| 6) Change   | Add                         |           |                |                     |
| Add   | Remove                      |           |                |                     |
| Add   | 6) Change                   |           |                |                     |
| Remove  |                             |           |                |                     |
|   | Remove                      |           |                |                     |

| Attach additional sheets, if necessary). | ticles, enter change(s)<br>(Be specific) |                    |             |   |
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| f an amendment provides for an exc       |  |                    |             |   |
|  | endment if not contai                    | ined in the amendm | ent itself: |   |
| provisions for implementing the am       |  |                    |             |   |
|  |  |                    |             |   |
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| provisions for implementing the am       |  |                    |             |   |
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| provisions for implementing the am       |  |                    |             |   |
| provisions for implementing the am       |  |                    |             |   |

| The date of each amendment(s) as date this document was signed.          | leption: <u>11/ b</u>                           | 5/2015                       |                                | , it other than th            |
|--|---|------------------------------|--------------------------------|-------------------------------|
| _  | ſ   | 1                            |                                |                               |
| Effective date <u>if applicable</u> :                                    | (no mor   | re than 90 days after o      | amendment file date)           |                               |
| Note: If the date inserted in this b document's effective date on the De |   |                              | y filing requirements, this    | date will not be listed as th |
| Adoption of Amendment(s)   | ( <u>CHECK ON</u>                               | <u>(E</u> )                  |                                |                               |
| ☐ The amendment(s) was/were ado<br>by the shareholders was/were su       |   | lers. The number of v        | otes east for the amendme      | nt(s)                         |
| ☐ The amendment(s) was/were app<br>must be separately provided for       |   |                              |                                | rment                         |
| "The number of votes cast  | for the amendment(s)                            | was/were sufficient f        | or approval                    |                               |
| by   | (voting group                                   |                              | <del></del>                    |                               |
|  | (voting group                                   | <i>))</i>                    |                                |                               |
| ☐ The amendment(s) was/were ado action was not required.                 | pted by the board of c                          | directors without shar       | eholder action and shareho     | lder                          |
| The amendment(s) was/were ado action was not required.                   | pted by the incorpora                           | tors without sharehold       | der action and shareholder     |                               |
| Dated 11/6   | 25/2018   |                              |                                |                               |
| Signature $N\epsilon$  | 5 / 2018<br>bi Buata                            | NR                           |                                |                               |
| (By a di   | rector, president or of                         | ther officer - if direct     | ors or officers have not be    |                               |
|  | i, by an incorporatored ed fiduciary by that fi |                              | receiver, trustee, or other co | ourt .                        |
|  | NEBI  | BRAKA printed name of person |                                |                               |
|  | (Typed or                                       | printed name of person       | on signing)                    |                               |
|  | Presi   | ident                        |                                |                               |
|  | •   | (Title of person sign        | nina)                          |                               |