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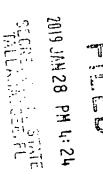
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

Undestrial Park Side Inc. NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Charles of Contact Person Undustrial Park Side Palm Coust, PKury Ste 4th NW ac a am fundloans. com For further information concerning this matter, please call: Ella Chaplylla at 386, 503-0327

Name of Contact Person Area Code & Daytime Telephone Number Euclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status □\$43.75 Filing Fee & □\$52.50 Filing Fee 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 P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation

FILED

	of
Undustrial,	Park Side 2019 Mat 28. PM 4: 24
(Name of Corporation	as currently filed with the Borida Dept. of State)
P 180001027	as currently filed with the filorida Dept. of State) TALLA JAUGUE, FL
	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida St ts Articles of Incorporation:	statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corp-	
-Industrial Park	K Side Im. The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must comain the abbreviation "P.A."
B. Enter new principal office address, if applicable:	NO
Principal office address MUST BE A STREET ADDRE	<u>ESS</u>)
. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	·
 If amending the registered agent and/or registered new registered agent and/or the new registered offi 	
new registered agent and/or the new registered of	ice address.
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
San Danisa and America State and Sta	
Sew Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I at	ered Agent: on familiar with and accept the obligations of the position.
. , , , , , , , , , , , , , , , , , , ,	S and the second
	
Signatur	we of New 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 = 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: <u>X</u> Change	PT	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>	Address
1) Change		_	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add		_	
Remove			
4) Change			
Add			
Remove			
51 Change		·	
Add			
Remove			
6) Change		_	
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
	
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for amondment provider for an arabi	and made wife attention and annualitation of the contribution of
provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
f an amendment provides for an exchi- provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:

The date of each amendment(s) adoption:	er than the
Effective date <u>if applicable:</u> (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 li- document's effective date on the Department of State's records.	sted as the
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.	
Dated01/19/2019	
Signature	
(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)	
(Typed or printed name of person signing)	_
Vice President (Title of person signing)	