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COVER LETTER

TO: Amendment Sect Division of Corpe					
NAME OF CORPOR	RATION: NUMON		late INC		
DOCUMENT NUME	BER: <u>\$1900</u>	0000534			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
		HINA PEL			
		Name of Contact Persor	1		
		NUMOVZ			
		Firm/ Company	~		
		STHENGEW	1000 DRIVE		
	St. Augustine Fl 32092 City State and Zip Code				
	VPELLOT C:	City/ State and Zip Code City/ State and Zip Code			
E-mail address: (to be used for future annual report notification)					
For further information	n concerning this matter, pleas	se call:			
Vihna	PELLOT	904	894 9223 de & Daytime Telephone Number		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:		
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate 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 Section			Address Inent Section		

Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Tallahassee, FL 32303

Articles of Amendment

Articles of Incorporation of

to

NUMEVE REAL ES	TFITE LAN	La Harida Dont of	State
Name of Corporation	n as currently filed with	i the Fiorida Dept. of	State)
	~		
(Document)	ent Number of Corporati	on (Il known)	
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this Florida Pro	<i>ofit Corporation</i> adopt	s the following amendmen
a. If amending name, enter the new name of the co	rporation:		
NIILLANO THE			The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp." "Inc.," "chartered," "professional association," or the abbrev	orporation," "company," ' or "Co", A professio	or "incorporated" or to mal corporation name	he abbreviation "Corp.," must contain the word
enarierea, professamai association, or the wisco			~ ?
 Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADD</u> 	<u></u> ORESS)		
Enter new mailing address, if applicable:			•
(Mailing address MAY BE A POST OFFICE BO.	<u>X</u>)		
			; -
O. If amending the registered agent and/or register new registered agent and/or the new registered.	red office address in Flo office address:	orida, enter the name	of the
Name of New Registered Agent			
Tame ty ten mis			
	(Florida street address	.,	
		1.	9 I
New Registered Office Address	(City)	, , ,	lorida (Zip Code)
New Registered Agent's Signature, if changing Reg	vistered Avent:		
hereby accept the appointment as registered agent.	I am familiar with and c	accept the obligations o	of the position.
•			
		to an it abancian	
Sign	ature of New Registered	agem, a enunging	

Check if applicable

The amendment(s) is are being filed pursuant to s. 607.0120 (11) (e). F.S.

tach additional sheets, if necessary). (Be specific)	
<u> </u>	
	[]
	· :
	··
	, in
an amendment provides for an exchange, reclassification, or cancellation of issu	<u>ied shares,</u> itself:
revisions for implementing the amendment if not contained in the amendment (if not applicable, indicate N/A)	
1. 1.7.	
<u>/</u>	

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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</u>	John Doe		
X Remove	\underline{V}	Mike Jones		
X Add	<u>SV</u>	Sally Smith		~2,
Type of Action (Check One)	Title	Name	<u>Addres</u> s	- :
1) Change				_ ·
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

The date of each amendmen	nt(s) adoption:	if other than the
date this document was signe	:d.	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on	i this block does not meet the applicable statutory filing requirements, this date with Department of State's records.	ll not be listed as the
Adoption of Amendment(s)) (<u>CHECK ONE</u>)	
The amendment(s) was/w action was not required.	ere adopted by the incorporators, or board of directors without shareholder action an	d shareholder
☐ The amendment(s) was/w by the shareholders was/	were adopted by the shareholders. The number of votes east for the amendment(s) were sufficient for approval.	
	The following statement	·~,
The amendment(s) was'w must be separately provi	were approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(s):	- - -
"The number of vol	tes cast for the amendment(s) was/were sufficient for approval	
		_
by	(voting group)	
	• •	• •
	AN 11 1 3 5	 *
Dated	US MAZCH 23	
Signature	4 Pina & NUTA	
Signature	18% addirector, 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)	
	Vitura CPALOT	
	(Typed or printed name of person signing)	
	Pres	
	(Title of person signing)	