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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: CHABO & ASSO	CIATES, INC			
DOCUMENT NU	MBER: P19000019687				
	des of Amendment and fee are su	abmitted for filing.			
Please return all co	orrespondence concerning this ma	atter to the following:			
	ROBERT RECKLEIN				
		Name of Contact Persor	1		
	VANDERBILT COMPANII	ES, INC			
		Firm/ Company			
	11983 TAMIAMI TRAIL N	ORTH STE 138			
		Address			
	NAPLES, FL 34110				
		City/ State and Zip Code	e		
	VANDERBILTRJR@ATT.NET				
	_	sed for future annual report	notification)		
For further inform	ation concerning this matter, plea	ase call:	594-6999		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fe	e S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ameno Divisio The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation of

CHABO & ASSOCIATES, INC		==
(Name of Corporation as currently	filed with the Florida Dept. of State)	
P19000019687		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this Fl its Articles of Incorporation:	lorida Profit Corporation adopts the following an	nendment(s) to
A. If amending name, enter the new name of the corporation:		
	77:	ie new
name must be distinguishable and contain the word "corporation," "cor "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation " professional corporation name must contain th	Corp.," se word
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SEC. STALLANDESE.	FILED
D. If amending the registered agent and/or registered office address	·;	
new registered agent and/or the new registered office address:	n; w	
Name of New Registered Agent		
(Florida street	rt address)	
New Registered Office Address:	Florida	
(6	Tity) (Zip Code	?)
N. D. C. L. C. C. L. W. C. Landing Business and America		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	th and accept the obligations of the position.	
Cinnatum of Van. B	gistered Agent, if changing	
Signature of New Reg	concrea rigem, y enangurg	
Check if applicable		

☐ 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT Jo</u>	ohn Doe	
X Remove	<u>V</u> <u>M</u>	like Jones	
X Add	<u>sv</u> <u>sa</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	ANTONINO V. CARACCI IV	14225 MANCHESTER DR.
X Add			NAPLES, FL 34114
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary)	. (Be specific)				
					
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			· · · ·		
an amendment provides for an ex- rovisions for implementing the an	<u>change, reclassif</u>	ication, or can	<u>cellation of iss</u>	ued shares, itself:	
(if not applicable, indicate N/A)	iendment it not	contained in ti	ic amendinent	11.3011.	
13					
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The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file	date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing require partment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sh	areholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for this ifficient for approval.	e amendment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following group entitled to vote separately on the amend	lowing statement dment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
Dated	irector, president or other officer – if directors or officers h	nave not been
	ted fiduciary by that fiduciary)	. W viii zviii
	CHANCE BOHM	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	