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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: WHITE UN	SLIMITED INV	ESTINC
DOCUMENT NUMBER	R: 719 0000	51529	<u> </u>
	Amendment and fee are su		
Please return all correspo	ndence concerning this ma	tter to the following:	
	Os	VALDO BLANE	D.
	·· · · · · · · · · · · · · · · · · · ·	Name of Contact Perso	on
	WHITE U	INLIMITED IX	NEST INC
		Firm/ Company	
	4690 111 "	7th ANE	
		Address	
	HIALEAH.	Address FURIDA 33 City/ State and Zip Con	012
		City/ State and Zip Co	de
	E-mail address: (to be us	ed for future annual repor	t notification)
		•	,
For further information co	oncerning this matter, pleas	se call:	
USVAC	DO BLANCO	at (_ 386	342 - 3591 ode & Daytime Telephone Number
Name of C	Contact Person	Area C	ode & Daytime Telephone Number
Enclosed is a check for th	e following amount made p	payable to the Florida Dep	partment of State:
□ \$35 Filing Fee		□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	<u> Address</u>		Address
	ment Section n of Corporations		dment Section on of Corporations
	ox 6327		Centre of Tallahassee
Tallaha	ssee, FL 32314		N. Monroe Street, Suite 810 passee, FL 32303

Articles of Amendment Articles of Incorporation

(Name o	, , , , , ,			1
(Name o	UNLIMITED I	WIEST A	re F1	LED
	UN LIMITED 18 of Corporation as currently 000051529	filed with the Flo	rida Dept-of-State)	2 50
719	000051529.			3 円12:57
	(Document Number of	Corporation (if kn	own)	
ursuant to the provisions of section 607. Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corp	oration adopts the fe	llowing amendment(s
If amending name, enter the new na	ame of the corporation:			
WHITE UNLIMITE	ED INVESTMEN	ITS INC		The new
me must be distinguishable and contain nc.," or Co.," or the designation "C hartered," "professional association."	Corp," "Inc," or "Co". A	professional corp	oration name must	contain the word
Enter new principal office address, Principal office address <u>MUST BE A S</u>				
			.	
Enter new mailing address, if appli (Mailing address MAY BE A POST)				
(Mutting address MAT BE A FOST)	JPFICE BUX			
				
. If amending the registered agent an new registered agent and/or the new		ss in Florida, ent	er the name of the	
Name of New Registered Agent				
	-			
	(Florida stree	et address)		
	(110/144 31/66	•		
New Registered Office Address:	Triorita stree		, Florida_	

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

Example: X Change	РŢ	John Doe	1	
X Remove	<u>V</u>	Mike Jon		
X Add	<u>SV</u>	Sally Sm	<u>ith</u> .	
Type of Action (Check One)	<u>Title</u>	-	<u>Name</u>	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change		 .	1.15 100	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

itach additional s	ding additional Art heets, if necessary).	(Be specific)				
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an amandment r	provides for an excl	hange reclassifi	cation or cancel	lation of issued s	charoc	
ovisions for im	plementing the ame	endment if not c	ontained in the a	mendment itsel	<u>f:</u>	
(if not applica	ble, indicate N/A)			-		
		<u></u>	<u> </u>	· · · ·		
					· · · · · · · · · · · · · · · · · · ·	
						
			•			
		 _				

المال الكام ومال	each amendment(s) adoption:	, if other than th
date this doci	cument was signed.	
Effective dat	nte if applicable: 02/19/1024. (no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
	e date inserted in this block does not meet the applicable statutory filing requirements, this date wi effective date on the Department of State's records.	ill not be listed as th
Adoption of	f Amendment(s) (<u>CHECK ONE</u>)	
	ndment(s) was/were adopted by the incorporators, or board of directors without shareholder action an as not required.	d shareholder
	ndment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) nareholders was/were sufficient for approval.	
must be s	ndment(s) was/were approved by the shareholders through voting groups. The following statement separately provided for each voting group entitled to vote separately on the amendment(s): ne number of votes cast for the amendment(s) was/were sufficient for approval	
1.11		
by .	(voting group)	
	Dated 02/19/2024	
	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)	