## P190000 55293

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	ATION: EVERGE	CEN Home.	S Marketing Compa
	r: <u>7190000</u>		
The enclosed Articles of	Amendment and fee are su	abmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
- -	Ido StEA	Name of Contact Pers	son
_1	EVERGIEEN	Hom(S Mal	KETING Company
_	7601 N. FE.	DERAL HWY	KETING Company Y, #240 A
<u>-</u>	Boca Rato		
	+ FRN & S+ E-mail address: (to be us	·	ort notification)
Ido StE	RN	ar <b>56</b> 7	609-3556
Name of	Contact Person	Area (	Code & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida De	epartment of State:
S35 Filing Fee	□\$43.75 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)
Amend Division	ng Address dment Section on of Corporations ox 6327	Ame Divis	et Address ndment Section sion of Corporations on Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

(Name of Corporation :	as currently filed with the Florida Dept. of State)
P19000055293	
(Document	t Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida St its Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpo	oration:
name must be distinguishable and contain the word ' "Corp.," "Inc.," or Co.," or the designation "Corp." ' word "chartered," "professional association," or the abl	The new corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRE</u>	ESS')
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent	
<del></del>	(Florida street address)
New Registered Office Address;	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I at	ered Agent: m familiar with and accept the obligations of the position.
	re 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 Doc 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	·	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>CFO</u>	Josef Rubensten	7601 N. FEDERAL Huy
_/_ Add			#2401
Remove			Boxa Raton, FL 33487
2) Change	<u>up</u>	Alvaro Ramirez	Boxa Raton, FL 33487 7601 N. FLDERAL HWY'
Add			#240 A
Remove			Boca Rator, FL 33487
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			-
Add			
Remove			

Attach additional sheets, if necessary	Articles, enter change(s) here: y). (Be specific)	
	·	
		-
		•
If an amendment provides for an ev	exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the ar	mendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	)	

The date of each amendment(s) ad	loption:	, if other than the
late this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this dat partment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s fficient for approval.	)
	roved by the shareholders through voting groups. The following stateme, each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
hy	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholde	г
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	10/8/19	
Signature	4	
(By a di selected	rector, president or other officer – if directors or officers have not been I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Ida Sten	
	(Typed or printed name of person signing)	
	(Title of person signing)	
	(Title of person signing)	