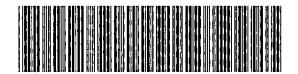
PIECO 175744

(Requestor's Name)
(Address)
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,
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PICK-UP WAIT MAIL
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7" | L. E. L. / 2021 OCT 28 PM 3: 54 SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: STUDIO FOR AR	CHITECTURE, INC.			
DOCUMENT NUME	ER: P19000078799				
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	MARY C ROCHE				
		Name of Contact Person			
	STUDIO FOR ARCHITECTURE, INC.				
		Firm/ Company			
	1528 JACKSON ST	• •			
		Address			
	FT MYERS, FL 33901				
		City/ State and Zip Code	•		
	cathy.roche@st4arc.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, plea	se call:			
MARY C ROCHE		at (496-7891		
Name of Contact Person		at (407) 496-7891 Area Code & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:		
S35 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED 2021 OCT 28 PM 3: 54 SECREJARY OF STATE

STUDIO FOR ARCHITECTURE, INC.

(Name of Corporation as currently	v filed with the Florida Dept. of State)	
P19000078799		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this a lits Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t	
A. If amending name, enter the new name of the corporation:		
NA	The new	
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp.,"	
B. Enter new principal office address, if applicable:	1528 JACKSON ST	
(Principal office address MUST BE A STREET ADDRESS)	FT MYERS, FL	
	33901	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1528 JACKSON ST	
	FT MYERS, FL	
	33901	
D. If amending the registered agent and/or registered office addinew registered agent and/or the new registered office address	33901 ress in Florida, enter the name of the	
	33901 ress in Florida, enter the name of the	
new registered agent and/or the new registered office address	33901 ress in Florida, enter the name of the	
new registered agent and/or the new registered office address	33901 ress in Florida, enter the name of the	
Name of New Registered Agent N A	33901 ress in Florida, enter the name of the	

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	<u>PT</u> <u>John</u>	<u>ı Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change		NA	
Add			
Remove			
2) Change		NA	
Add			
Remove 3) Change		NA	
Add			
Remove			
4) Change		NA	
Add			
Remove			
5) Change		NA	
Add			
Remove			
6) Change		NA	
Add		,	
Remove			

E. If amending or additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
NA
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
NA

The date of each amendment(s) adoption: _	NA	, 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 block does document's effective date on the Department of	not meet the applicable statutory filing requirements of State's records.	s, this date will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)	
■ The amendment(s) was/were adopted by the action was not required.	e incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the ame r approval.	endment(s)
	he shareholders through voting groups. The following group entitled to vote separately on the amendment	
"The number of votes cast for the am	endment(s) was/were sufficient for approval	
bv		
	oting group)	
selected, by an /no	sident or other officer – if directors or officers have recorporator – if in the hands of a receiver, trustee, or or by that fiduciary)	
Ma	(Typed or printed name of person signing)	
FR	ESIDENT (Title of person signing)	