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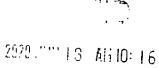
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TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: A K FINANCIAL	728 CORP			
DOCUMENT NUMB	ER: P20000018755				
	f Amendment and fee are su	bmitted for filing.			
Please return all corres	condence concerning this ma	tter to the following:			
	AMANDA HAYES				
-		Name of Contact Perso	n		
-		Firm/ Company			
	28 KINGSBRIDGE CROSSI	NG DR			
-		Address			
	ORMOND BEACH, FL 32174				
-		City/ State and Zip Coo	de		
_	amanda @Ak	ctlfinancistco	orp.com		
	E-mail address: (to be us	ed for future annual repor	t notification)		
For further information	concerning this matter, pleas	se call:			
AMANDA HAYES		386	ode & Daytime Telephone Number		
Name o	f Contact Person	Area Co	ode & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Dep	partment of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 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



A K FINANCIAL 728 CORP

(Name of Corporation as currents	y filed with the Florida Dept. of State)			
P20000018755	•			
(Document Number of	f Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this and the Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t			
A. If amending name, enter the new name of the corporation:				
AKH FINANCIAL CORP	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.," 1 professional corporation name must contain the word			
B. Enter new principal office address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)	N/A			
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)	N/A			
D. If amending the registered agent and/or registered office addr	ress in Florida, enter the name of the			
new registered agent and/or the new registered office address:				
Name of New Registered Agent				
	NIA			
(Florida stre	eet address)			
(Florida stre	eel address) , 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)

Example:

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.

X Change	<u>PT</u>	<u>John Do</u>	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
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				

	ional sheets, ij	f necessary).	(Be specific)				
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an amend	ment provide	s for an exch	ange, reclassifi	cation, or car	cellation of is	sued shares,	
<u>provisions 1</u> if not a	<u>for implemen</u> upplicable, ind	ting the amen licate N/A)	idment if not c	ontained in th	<u>he amendmen</u>	t itself:	
-							
				-			_
							
		<u>.</u>	· · · · · · · · · · · · · · · · · ·				
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			4				

The date of each amendment(s)	adoption:	, if other than the
date 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 document's effective date on the I	block does not meet the applicable statutory filing requirements Department of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without shareho	lder action and shareholder
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the ame sufficient for approval.	ndment(s)
☐ The amendment(s) was/were as must be separately provided for	oproved by the shareholders through voting groups. The following area or each voting group entitled to vote separately on the amendment	ç statement (s):
"The number of votes car	st for the amendment(s) was/were sufficient for approval	
by		
•	(voting group)	
Dated	15-2020	
Signature		_
(By ar selec	director, president or other officer – if directors or officers have need by an incorporator – if in the hands of a receiver, trustee, or o ared fiduciary by that fiduciary)	ot been ther court
	AMANDA HAYES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	