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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: <u>EAGLE</u> Se The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CLAUDIA DONIAT EAGLE SE INC. 96331 OYSTER BAY DR. FERNANDINA BEACH, FL 32034
City/State and Zip Code uclia. doniate me. com
address: (to be used for future annual report notification) For further information concerning this matter, please call; CLAUDA DONIAT at 904 3773890

Area Code & Davtime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & ■\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of An	nendment E.
to Articles of Inco	ornoration 2020
of	JUH _ D
EAGLE SE	orporation ZOZZ JUH - 2 PH 1:28 Filed with the Florida Dept. of State)
	filed with the Florida Dept. of State)
P200000	45/19
	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	N/A The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany, " or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NA
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 address: new registered agent and/or the new registered office address:	
Name of New Registered Agent	_/\/ /
(Florida stre	et address)
New Registered Office Address:	, Florida
((Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	eith and accept the obligations of the position.
Signature of New Re	rgistered Agent, if changing

Check if applicable

 $[\]Box$ 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: <u>X</u> Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
1) Change	<u>D</u>	CESAR A. BORGOS III	96331 OYSTER BAY DR
Add			TERNANDINA BEACH
Remove		i	FL, 32034
2) Change			
Add			
Remove 3) Change			
Add			/
Remove			
4) Change		_ //	
Add			/
Remove			/
5) Change		/ _ : _ / _ / _ / _ / _ / _ / _ / _ / _ / _	/
Add			
Remove	(/ /	
6) Change			
Add			
Remove			

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an amendment pro	wides for an exchar	nge, reclassification, of Iment if not contained	<u>r cancellation of is</u> Lin the amendmen	sued shares,	
(if not applicable	indicate N/A)	ment it not contained	m the amendmen	t itsein.	
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	,	N/A			
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The date of each amendment(s) adoption: $\frac{5/25/2022}{}$, 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 not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by"
(voting group)
Signature (By a director, president of 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)
CLAUDIA DONIA.
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)