P20000000173

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: LIGHTHOUSELR	IS SERVICES INC		
DOCUMENT NUM	P20000060173			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	tter to the following:		
	NUBIA GARCIA			
		Name of Contact Person	1	
	NG ACCCOUNTING AND	TAX SERVICES		
		Firm/ Company		
	1900 SABAL PALM DR SU	TTE 101		
	····	Address		
	DAVIE, FL 33324			
		City/ State and Zip Code	2	
	nubiacgarciac@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	ion concerning this matter, plea	se call: at (at (781-4165	
Name	e of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 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		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee	
Ta	Hahassee, FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

to

LIGHTHOUSELRIS SERVICES INC

(Name of Corporatio	n as currently filed w	ith the Florida Dept. o	f State)	
P20000060173				
(Docume	ent Number of Corpora	tion (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida F	Profit Corporation adop	ts the following	; amendment(s)
A. If amending name, enter the new name of the con	rporation:			
LIGHTHOUSEIRIS SERVICES INC				The new
name must be distinguishable and contain the word "con"Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	or "Co". A professi			n "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDI				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX D. If amending the registered agent and/or registere	ed office address in Fl	orida, enter the name	of the . ~	
new registered agent and/or the new registered o	ffice address:		1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Name of New Registered Agent			AP	\neg
		•	2	F -
	(Florida street addres.	s)	——————————————————————————————————————	Ш
New Registered Office Address:		r	- 근실 초 lorida	\odot
New Negisierea vynce Address.	(City)			ode)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I Signat			f the position.	
Cheat if applicable				
Check if applicable The amendment(s) is/are being filed pursuant to s. 60	07 0120 (11) (a) E.C.			

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.

X Change	<u>PT</u>	John Doc	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
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			<u> </u>
Add			w
Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
(Mach unumonal sheets, if necessary). (Be specific)
· · · · · · · · · · · · · · · · · · ·
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)

04/22/2021 _, if other than the The date of each amendment(s) adoption: date this document was signed. 02/01/2021 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. (CHECK ONE) Adoption of Amendment(s) 🚍 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 (voting group) Dated. 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)