P20000071577

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S. PRATHER

COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION:	20000071577
DOCUMENT NUMBER:	20060071577
The enclosed Articles of Amendment and	fee are submitted for filing.
Please return all correspondence concernia	ng this matter to the following:
26	Ibelia frase
	Name of Contact Person DIDWELL BUNKER PEALTY Firm/ Company
118	Firm/Company SE Atlantic Ave
	Address City/ State and Zip Code
reb	City/ State and Zip Code CLA by uton @ ic loud, com :: (to be used for future annual report notification)
For further information concerning this ma	atter, please call:
Pebrua Frace	at (501), 358-806 Y Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amo	unt made payable to the Florida Department of State:
\$35 Filing Fee S43.75 Filin Certificate of	-
Mailing Address	Street Address
Amendment Section Division of Corporation	Amendment Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Ame	endment	****	76
to Articles of Incor	norstion	<u>. </u>	24
Of .	ton, D.A.		JUE 2
(Name of Corporation as currently f	· · · · · · · · · · · · · · · · · · ·	173	<u> </u>
P2000071577			7.
(Document Number of C			7 59
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Fla</i> its Articles of Incorporation:	orida Profit Corporation adopts the follow	ving ame	
A. If amending name enter the new name of the corporation: [Lebecca Bruton Fra]			new
name must be distinguishable and contain the word "corporation," "cor "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	orofessional corporation name must con	tain the	word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Deiray Beach, Fl		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	79 Island Drs Ocean Ridge, PL	<u>,</u> 334.	<u>-</u> 35
1185 E A	bruton frask Hantil AVL		
New Registered Office Address: Dell'Ay Buch	y address) Sity) Florida (Z	348 Tip Codes	3_
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position	on.	
Reliably Signature of New Reg	astered Agent, if changing		

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Bruton,	<u>Addres</u> s
l) Change	P	Pela J	OSZO NO CEAN BIVJTY OCEAN RILET, PC 33435
Add Remove	70		Ocean Ridge, PC 33455
2) Change Add	P	Frasc Peberia B.	Clean Ridar, Fr 33435
Remove 3) Change			
Add			
Remove			
4) Change			<u></u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
	
	
If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than
Effective date if applicable: \[\begin{align*} \lambda	
(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 document's effective date on the Department of State's records.	ate will not be listed as
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	ion and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ient
"The number of votes cast for the amendment(s) was/were sufficient for approval by"	2024 J
(voting group)	
Dated 10/20/2024	NZ4 JUH ZU ATI 7: 5 III. 11 1000 SEEL HÜÜRH
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 cou appointed fiduciary by that fiduciary)	
Nebella Bruten Frak	
(Typed or printed name of person signing)	
President	
(Title of person signing)	

the

the