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R. WHITE.
JAN 2 3 2021

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON: HOMES 360 ENT	ERPRISES CORP	
DOCUMENT NUMBER:	P20000078894		
The enclosed Articles of An	nendment and fee are su	bmitted for filing.	
Please return all correspond	ence concerning this ma	tter to the following:	
JUA	N D ECHEVERRI		
		Name of Contact Persor	1
HOM	IES 360 ENTERPRISE	S CORP	
		Firm/ Company	
2229 MARSH VIEW DR			
		Address	
WES	LEY CHAPEL, FL 335	<u> </u>	
		City/ State and Zip Code	2
1	E-mail address: (to be us	sed for future annual report	notification)
For further information cond	erning this matter pleas	se call:	
To raine mormaton con	erning this matter, pied.		
JUAN D ECHEVARRI		at (995-1835 le & Daytime Telephone Number
Name of Contact Person		Area Coo	le & Daytime Telephone Number
Enclosed is a check for the f	ollowing amount made	payable to the Florida Depa	irtment of State:
S35 Filing Fee [□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Division o P.O. Box e	nt Section f Corporations	Amend Division The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment **Articles of Incorporation** οſ

	of	5	· - · · · · · · · · · · · · · · · · · ·
HOMES 360 ENTERPRISES CORP		Ŀ	
· · · · · · · · · · · · · · · · · · ·	on as currently filed wit	h the Florida Dep	t. of State)
P20000078894		 	
(Docum	nent Number of Corporat	ion (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Pr	ofit Corporation a	dopts the following amendment(s)
A. If amending name, enter the new name of the co	orporation:		
			The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc," "chartered." "professional association," or the abbre	or "Co". A professio		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		 .	
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	X)		
	 -		
D. If amending the registered agent and/or register new registered agent and/or the new registered of		rida, enter the na	me of the
Name of New Registered Agent			
	(Florida street address)	-	
New Registered Office Address:			Florida
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Regi	ictored Agent:		
I hereby accept the appointment as registered agent.	l am familiar with and ac	cept the obligation	is of the position.
Signa	tture of New Registered :	gent, if changing	
0 ···	, in		

Check if applicable

☐ The amendment(s) is/are being tiled 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	<u>Name</u>	<u>Addres</u> s
1) Change	Р	JOSE D REYES	2229 MARSH VIEW DR
Add			WESLEY CHAPEL, FL 33544
X Remove			
2) Change	P	JUAN D ECHEVERRI	2229 MARSH VIEW DR
X Add			WESLEY CHAPEL, FL 33544
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
. <u>If an amendment provides for an exch</u>	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:

12/1/2020 ______, if other than the The date of each amendment(s) adoption: ___ 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 (voting group) 12/1/2020 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) JUAN D ECHEVERRI (Typed or printed name of person signing) PRESIDENT

(Title of person signing)