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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: <u>A 4R CORP</u>					
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Adrian Rivera Name of Contact Person					
Name of Contact Person					
AHR CORP Firm/ Company					
Address					
1655 SWEETWATER WEST CIR Address AROPKA, Florida 32712 City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Name of Contact Person at (646) 739 - 4544 Area Code & Daytime Telephone Number					
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee \$\begin{array}{ c c c c c c c c c c c c c c c c c c c					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

AHR CORP		
(Name of Corporation as currently filed w	th the Florida Dept. of State)	
82000019047		
(Document Number of Corpora	tion (if known)	
Pursuant to the provisions of section 607,1006. Florida Statutes, this <i>Florida F</i> its Articles of Incorporation:	Profit Corporation adopts the following amendmen	nt(s) to
A. If amending name, enter the new name of the corporation:		
	The new	
name must be distinguishable and contain the word "corporation," "company, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional association," or the abbreviation "P.A."	" or "incorporated" or the abbreviation "Corp.,"	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
	- 1	
	· · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	1	
	- <u></u>	
	رې	
D. If amending the registered agent and/or registered office address in Fl new registered agent and/or the new registered office address:	orida, enter the name of the	
Name of New Registered Agent		
(Florida street addres	-1	
· ·	,	
New Registered Office Address: (City)	Florida, Florida	
	• •	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and a	accept the obligations of the position.	
Signature of New Registered	Agent, if changing	
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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> Jo	ohn Doc			
X Remove	<u>V</u> <u>N</u>	Mike Jones			
<u>X</u> Add	<u>sv</u> s	ally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) X Change	P	Ryan RIVERA	1655 Sweet WOHER		
Add Remove 2) \(\sum_{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tin}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tetx{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tetx{\text{\text{\text{\text{\text{\text{\text{\texi}\text{\text{\tin\text{\text{\texit{\texi{\texi{\texi{\text{\texi{\texi\texi{\texit{\text{\text{\texi{\text{\texi}\text{\texi}\texit{\tet	<u> </u>	Susana Cintron	West Circle APOPKA, FI 32712 1655 Sweet Water West Circle		
Remove Change Add			APOPKA, F1 32712		
Remove 4)ChangeAdd	?	Adrian Rivera	1655 Sweet water WEST Circle		
Remove Change Add	<u>Clv</u>	Adrian Rivera	APOPKA, FI 32712 1655 Sweet Water West Circle		
Remove 6) Change Add Remove			A POPKA, F1. 321/2		

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an amendment provides for an exchange, reclassification, or cancellation of issue royisions for implementing the amendment if not contained in the amendment its (if not applicable, indicate N/A)	
	

The date of each amendment(s) adopt	ion:	, if other than the
date this document was signed.	.a	
Effective date if applicable:	11/2020	
	(no more than 90 da	ys after amendment file date)
Note: If the date inserted in this block document's effective date on the Depart		e statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or boar	rd of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient		mber of votes cast for the amendment(s)
☐ The amendment(s) was/were approve must be separately provided for each		h voting groups. The following statement eseparately on the amendment(s):
"The number of votes cast for t	he amendment(s) was/were s	ufficient for approval
by A4F	COFF (voting group)	<u>.</u>
•	(voting group)	
Dated1_2!	4/2020	
Signature		
selected, by		- if directors or officers have not been ands of a receiver, trustee, or other court
	(Typed or printed name	ic of person signing)
	(Title of person signin	g)