P20000098640

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R. WETT

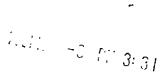
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: CARRIER JA INC	•				
DOCUMENT NUM	P2000009640					
The enclosed Article	es of Amendment and fee are su	bmitted for filing.				
Please return all core	respondence concerning this ma	itter to the following:				
	MAYLEN FALCON					
	Name of Contact Person					
	EXTREME QUALITY GROUP INC					
		Firm/ Company				
	780 THORPE RD. STE 2					
	Address					
	ORLANDO FL 32824					
		City/ State and Zip Co	de			
	EXTREMEQUALITYGROUP@OUTLOOK.COM					
		sed for future annual repor	rt notification)			
For further informat	ion concerning this matter, plea		985-2417			
Name of Contact Person		at (407) 985-2417 Area Code & Daytime Telephone Number				
Enclosed is a check	for the following amount made					
■ \$35 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)			
Mailing Address			t Address			
	nendment Section	Amendment Section				
Division of Corporations P.O. Box 6327			ion of Corporations Centre of Tallahassee			
	llahassee, FL 32314		N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



CARRIER JA INC (Name of Corporation as currently filed with the Florida Dept. of State) P20000098640 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 4952 LONGMEADOW PARK ST B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) ORLANDO, FL 32811 C. Enter new mailing address, if applicable: 4952 LONGMEADOW PARK ST (Mailing address MAY BE A POST OFFICE BOX) ORLANDO, FL 32811 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: ANTONIO ANEZ FERRER Name of New Registered Agent 4952 LONGMEADOW PARK ST (Florida street address) . Florida_ 32811 ORLANDO New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and 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) (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)

Example:

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		Name	<u>Addres</u> s	
I) X Change	P	_	ANTONIO ANEZ FERRER	4952 LONGMEADOW PARK ST	
Add				ORLANDO, FL 32811	
Remove				•	
2) Change		_			
Add					
Remove 3) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change		_			
Add					
Remove				-	

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

 $(x,y) \in \mathcal{C}_{p_{1}}(x,y) = (x,y) \in \mathcal{C}_{p_{1}}(x,y) =$

	03/03/2021	
The date of each amendment(s date this document was signed.		, if other than the
(3/03/2021	
Effective date <u>if applicable</u> : _		
	(no more than 90 days after amendment fi	le date)
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requi Department of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for sufficient for approval.	the amendment(s)
	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the amo	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	, w	
	(voting group)	
03/03/20	021	
DatedSignature	Titul	
(By sele	director, president or other officer – if directors or officerected, by an incorporator – if in the hands of a receiver, trust binted fiduciary by that fiduciary)	
	ANTONIO ANEZ FERRER	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	