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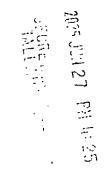
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SB 8/14/25

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: F M ROSS CORPORATION				TACK.
DOCUMENT NUME	P21000003775			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		•
	DAVID ROSS			
		Name of Contact Person	1	
	F M ROSS CORPORATION			
		Firm/ Company		
	21485 NW 27TH AVENUE			
		Address		
	MIAMI GARDENS, FL 33056			
	City/ State and Zip Code			
DAVID@STADIUMHOTEL.COM				
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
BRUCE HORWICH		305	345 3535	
Name o	f Contact Person	Area Coo) de & Daytime Telephone Nun	nber
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
\$35 Fiting 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)	
Ame Divi: P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassec J. Monroe Street, Suite 810 ssec, FL 32303	

Articles of Amendment to Articles of Incorporation of

E M ROSS CORPORATION

F M ROSS CORPORATION			
(Name of Corporation :	as currently filed with t	he Florida Dept. of State)
P21000003775			
(Document	t Number of Corporation	(if known)	297
Pursuant to the provisions of section 607.1006, Florida Strits Articles of Incorporation:	atutes, this Florida Profi	t Corporation adopts the f	
A. If amending name, enter the new name of the corpo	oration:		27
name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp," "Inc.," or "chartered," "professional association," or the abbrevia	r "Co". A professiona	"incorporated" or the abb l corporation name must	reviation."Corp.," contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u></u>		
 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered new registered agent and/or the new registered offi 		la, enter the name of the	
Name of New Registered Agent			
	(Florida street address)		
	(Fibrial street dadress)		
New Registered Office Address:	(City)	, Florida_	(Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	ered Agent: m familiar with and acce _l	pt the obligations of the po	sition.
Signatur	re of New Registered Age	nt, if changing	
Check if applicable			
☐ The amendment(s) is/are being filed pursuant to s. 607	7.0120 (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	<u>Name</u>	<u>Addres</u> s
1) X Change	V	FRANCES ROSS	21485 NW 27TH AVENUE
Add			MIAMI GARDENS, FL 33056
Remove			
2) Change	P	DAVID ROSS	21485 NW 27TH AVENUE
X Add			MIAMI GARDENS, FL 33056
Remove 3) Change	<u>v</u>	WILLIAM ROSS	21485 NW 27TH AVENUE
X Add			MIAMI GARDENS, FL 33056
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

	g or adding additional Articles, enter change(s) here: tional sheets, if necessary). (Be specific)
<u> </u>	
·	
	
f an amen	lment 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)

The date of each amendment(s date this document was signed.) adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file	e date)
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requir Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without s	hareholder action and shareholder
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the sufficient for approval.	he amendment(s)
	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the ame	
"The number of votes e	ast for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
06/19/24 Dated	025	
Signature	Will	
sele	a director, president or other officer – if directors or officers eted, by an incorporator – if in the hands of a receiver, trusted binted fiduciary by that fiduciary)	
	DAVID ROSS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	