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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Firm/ Company Address For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

is enclosed)

Articles of Amendment

Articles of Incorporation

Ĭ.	of	
AI Led Com	S	
(Name of Corporation	as currently filed with the F	florida Dept. of State)
PZIOOOODLIZ	$\overline{}$	
	nt Number of Corporation (if I	snown)
Pursuant to the provisions of section 607,1006, Florida S its Articles of Incorporation:	Statutes, this <i>Florida Profit Co</i>	rporation adopts the following amendment(s) t
A. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "corp" Inc.," or Co.," or the designation "Corp," "Inc," or chartered," "professional association," or the abbrevi	or "Co". A professional co	corporated" or the abbreviation "Corp.," rporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR		
Trincipal affice address <u>sitost BEA STREET ADDR</u>	(<u>(2.33</u>)	2
		73
		C)
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		9: 119
		9:1
	<u></u>	9
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	d office address in Florida, e fice address:	nter the name of the
Name of New Registered Agent		
- • · · · · · · · · · · · · · · · · · · 	(Florida street address)	
Mary Davidson of CAG and the same		OL 11
New Registered Office Address:	(City)	, Florida (Zip Code)
	·	,,,,,
New Registered Agent's Signature, if changing Regist	ered Agent:	
hereby accept the appointment as registered agent. I a	ım familiar with and accept th	e obligations of the position.
C:	re of New Registered Agent, if	C. L
Signatu	не од тен педышти муст, п	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; \hat{V} Vice President, \hat{T} Treasurer, \hat{S} Secretary, \hat{D} Director, $T\hat{K}$ Trustee, \hat{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 manuer. 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: X_Change	<u> 10 jolin l</u>	loc	
X Remove	<u>V</u> <u>Mike</u> .	Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	Cen	Coppie Delapolt	F301 S8 St H
Add			<u>Fot 203</u> Dinelles part (1 3378
			19th the part of 1951
Add			
Remove 3) Change	CEO	Dainien Stokes	
_ X Add			
Remove 4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

7-2)		ecessary) the s	1 /2/4		
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<u>provisions for</u>	ent provides for implementing olicable, indicat	the amendment	eclassification, or cancell if not contained in the a	lation of issued share: mendment itself:	<u>s.</u>
		···			
					
					·
	 - 	 		— <u>-</u>	
					

The date of each amendment(: date,this document was signed.	s) adoption:	>-16-9	CLI		, if other than the
Effective date <u>if applicable</u> :					
		(no more than 90	days after amen	dment file date)	
Note: If the date inserted in the document's effective date on the			ible statutory fil:	ing requirements, th	nis date will not be listed as the
Adoption of Amendment(s)	(<u>C1</u>	IECK ONE)			
Zi The amendment(s) was/were action was not required.	adopted by the	incorporators, or bo	oard of directors	without shareholder	r action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer			number of votes	cast for the amenda	nent(s)
☐ The amendment(s) was/were must be separately provided					
"The number of votes of	ast for the ame	ndment(s) was/were	e sufficient for a	pproval	•
by				·	
	(vo	ting group)			
Dated	3-16	-2021	<u></u>		
Signature	(Day	\ _2			
(By	a director, pres	sident or other office	er – if directors c	or officers have not b	ocen
	•	orporator – if in the y by that fiduciary)	hands of a recei	ver, trustee, or other	court
арр	onited riductary	y by that hadelary)	-)		
	70	MIEM	2701	3.62	
		(Typed or printed n	ame of person si	gning)	
		PO			
		(Title of person sign	ning)		