P21000014495

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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: HAGENMILLER SERVICES, INC DOCUMENT NUMBER: P21000014495 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: IAN D. HAGENMILLER Name of Contact Person HAGENMILLER SERVICES, INC Firm/ Company 16843 127th DRIVE N Address JUPITER, FL 33478 City/ State and Zip Code KEESING@BELLSOUTH.NET E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 378-8415
Area Code & Daytime Telephone Number KEESING CHIN-SANG Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

F Page	FILED		
2021 MAR	-2	ÅK 10:	36

HAGENMILLER SERVICES,INC	1088 -2 AM 10: 38
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P21000014495	• •
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," ' "Inc.," or Co.," or the designation "Corp," "Inc." or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
3. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
muning wavess mili DL A COST OFFICE DOX	
D. If amending the registered agent and/or registered office add	dress in Florida, enter the name of the
new registered agent and/or the new registered office addres	ss:
Name of New Registered Agent	
(Florida st	treet address)
V D : . IOVE ALL	
New Registered Office Address:	, Florida
	,
ew Registered Agent's Signature, if changing Registered Agen	<u>ıt:</u>
hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New I	Registered Agent, if changing
book if unulisable	
heck 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; 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:

X Change	<u>PT</u>	John De	<u>be</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	mith_	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	Р		DAVID L HAGENMILLER	16843 127th DRIVE N
Add				JUPITER, FL 33478
X Remove				
2) Change	P	_	IAN D. HAGENMILLER	16843 127th DRIVE N
X Add				JUPITER, FL 33478
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

	heets, if necessary).	(Be specific)			
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<u>an amend</u> ment p:	rovides for an excl	hange, reclassific:	<u>ition, or cancellat</u>	<u>ion of issued shar</u>	es,
	lementing the ame	endment if not co	ntained in the am-	<u>endment itself:</u>	
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• • •

	02/08/2021
The date of each amendment(s) adoption:, if other than t
date this document was signed.	
0 Effective date <u>if applicable</u> :	2/08/2021
meetine date in applicable.	(no more than 90 days after amendment file date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed as t Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
■ 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/were	adopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.
must he separately provided	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
02/24/20 Dated	21
Signature	Lan Algonaus
selec	a director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	IAN D. HAGENMILLER
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)