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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: NADCG CO DOCUMENT NUMBER: P21000034508 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: NANCY ALBERT Name of Contact Person NADCG CO Firm/ Company 439 NE BAKER ROAD Address STUART FL 34994 City/ State and Zip Code NADESIGNS@AOL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: NANCY ALBERT at (<u>561</u>) <u>945 - 000 7</u> Area Code & Daytime Telephone Number Name of Contact Person 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 (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

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

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) P21000034508 (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: The new name must be distinguishable and contain the word "corporation." "company." or "incorporated" or the abbreviation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered." "professional association." or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) STUART FL 34994 C. Enter new mailing address. if applicable: (Mailing address MAY BE A POST OFFICE BOX) TUART FL 34994 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered office address: Name of New Registered Agent NANCY ALBERT 439 NE BAKER ROAD (Florida street address) STUART Fiorida Fiorida 720 Code)	NADCG CO		
(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: The new 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 "Cor." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address if applicable: (Mailing address MAY BE A POST OFFICE BOX) TUART FL 34994 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: Name of New Registered Agent 439 NE BAKER ROAD STUART FL 34994 D. Hamending the registered Agent 439 NE BAKER ROAD (Florida street address) STUART Florida 34994	(Name)	of Corporation as current	ly filed with the Florida Dept. of State)
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: The new 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." B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS) STUART FL 34994 C. Enter new mailing address if applicable: (Mailing address MAY BE A POST OFFICE BOX) TUART FL 34994 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: Name of New Registered Agent ASSOCY ALBERT 439 NE BAKER ROAD (Florida street address) STUART Florida 34994	P21000034508		
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B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) STUART FL 34994 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: NANCY ALBERT 439 NE BAKER ROAD (Florida street address) NEW Registered Office Address: STUART Florida 134994	"Inc.," or Co.," or the designation "C	Corp," "Inc," or "Co".	'company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent New Registered Office Address: STUART STUART FL 34994 439 NE BAKER ROAD (Florida street address) STUART (Florida street address) STUART Florida (Florida street address)	B Enter new principal office address.	if applicable:	439 NE BAKER ROAD
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: Name of New Registered Agent 439 NE BAKER ROAD (Florida street address) STUART STUART (Florida 34994			STUART FL 34994
(Mailing address MAY BE A POST OFFICE BOX) STUART FL 34994 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: Name of New Registered Agent Nancy Albert 439 NE BAKER ROAD (Florida street address) STUART STUART Agent Structure of the name of the name of the new registered office address: NANCY Albert 439 NE BAKER ROAD (Florida street address) STUART Agent Structure of the name of the name of the name of the new registered address: NANCY Albert 439 NE BAKER ROAD (Florida street address)			
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Name of New Registered Agent 439 NE BAKER ROAD (Florida street address) New Registered Office Address: STUART Florida 134994			
439 NE BAKER ROAD (Florida street address) New Registered Office Address: STUART , Florida , Florida	NANCY ALBERT		
New Registered Office Address: 34994	intant by them regimened rigera	439 NE BAKER ROAD	
New Registered Office Address:, Florida		(Florida st	reet address)
	New Registered Office Address:	STUART	. Florida
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	$(\mathcal{A})a$	rajaleet	_
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	/	Signature of New I	Registered Agent, if changing

Check if applicable

 \square 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 Doc is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones teaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, P1 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
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4) Change			
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<i>5)</i> Change			
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6) Change			
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an amendment provide provisions for implemen	<u>is for an exchange</u> iting the amendm	ent if not conta	n, or cancellation ined in the amen	n of issued snares, dment itself:	
(if not applicable, inc	licate N/A)				
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The date of each amendment(s) adoption:date this document was signed.	, if other than the
-	
(no more than 90 day	es after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board action was not required.	of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The nur by the shareholders was/were sufficient for approval.	nber of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes cast for the amendment(s) was/were su	fficient for approval
by(voting group)	"
(voting group)	
Dated 5-1-2021 Signature (Data) Allut (By a director, president or other officer –	_
Signatura (Maray allert	
(By a director, president or other officer –	if directors or officers have not been
selected, by an incorporator – if in the har appointed fiduciary by that fiduciary)	ds of a receiver, trustee, or other court
••	
- CAJURCY ATE	e/f of person signing)
√Γyped or printed name	of person signing)
Pandost	
/(Title of person signing)