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| PICK-UP | ☐ WAIT | MAIL. | | |
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| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: San-Cap Consulting, Inc. DOCUMENT NUMBER: P21000040481 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Wendy L Prewitt aka Wendy S Holly Name of Contact Person San-Cap Consulting, Inc. Firm/ Company 102 River Lane Address Ormond Beach City/ State and Zip Code Florida 32176 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Wendy L Prewitt aka Wendy S Holly at (386) 438-3388

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: S35 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

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation

| (Name of Corporation as currently filed with the Flo | orida Dent (of State) |
|---|---|
| San-Cap Consulting, Inc. | () |
| (Document Number of Corporation (if known | own) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corp</i> its Articles of Incorporation: | noration adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| HavSun Florida, Inc. | The new |
| name must be distinguishable and contain the word "corporation," "company," or "incompany," or Co.," or the designation "Corp," "Inc," or "Co". A professional corp "chartered," "professional association," or the abbreviation "P.A." | rporated" or the abbreviation "Corp.," |
| 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) | |
| | |
| | V 40.118 - 8 4 |
| | - |
| D. If amending the registered agent and/or registered office address in Florida, enter | er the name of the |
| new registered agent and/or the new registered office address: | |
| Name of New Registered Agent Wendy S. Holly | |
| 102 River Lane | |
| (Florida street address) | |
| New Registered Office Address: Ormond Beach | , Florida |
| (City) | (Zip Code) |
| | |
| New Registered Agent's Signature, if changing Registered Agent: | |
| I hereby accept the appointment as registered agent. I am familiar with and accept the a | obligations of the position. |
| 1 | |
| 11) and us Stally | |
| Wondy S Hally Signature of New Registered Agent, if c | hanging |
| 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; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustec; 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 Doe | |
|----------------------------|--------------|-----------------|------------------------|
| X Remove | <u>v</u> | Mike Jones | |
| _X Add | <u>\$V</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | CEO | Wendy L Prewitt | 102 River Lane |
| Add | | | Ormond Beach, FL 32176 |
| X Remove | | | |
| 2) Change | CEO | Wendy S Holly | 102 River Lane |
| X Add | | | Ormond Beach, FL 32176 |
| Remove 3) Change | CFO | Michael A Holly | 102 River Lane |
| X Add | | | Ormond Beach, FL 32176 |
| Remove | | | |
| 4) Change | | - <u></u> | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | ******* |
| Remove | | | |
| 6) Change | | - | |
| Add | | | |
| Ramova | | | |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) | |
|---|---|
| or clarity to above, Wendy L Prewitt is the same person as Wendy S Holly | . Her name was changed due to a marriage. |
| r reference, the marriage license is attached. | |
| ne CEO is Wendy S Holly | |
| ne CFO is Michael A Holly | |
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| If an amendment provides for an exchange, reclassification, or cance | llation of issued chares |
| provisions for implementing the amendment if not contained in the | amendment itself: |
| (if not applicable, indicate N/A) (A | |
| <u> </u> | |
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| The data of such amountains (a) | August 23, 2021 | |
|---|---|-------------------------|
| The date of each amendment(s) date this document was signed. | adoption: | , if other than th |
| Au Effective date <u>if applicable</u> : | egust 23, 2021 | |
| Enective date it applicable. | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the I | block does not meet the applicable statutory filing requirements, this date will Department of State's records. | ll not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ■ The amendment(s) was/were action was not required. | dopted by the incorporators, or board of directors without shareholder action and | d shareholder |
| ☐ The amendment(s) was/were as by the shareholders was/were: | dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval. | |
| must be separately provided fo | oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s): | |
| | st for the amendment(s) was/were sufficient for approval | |
| by N/A | 11 | |
| | (voting group) | |
| August 23 Dated | 3, 2021 | |
| Signature | endy & Prewest Wesly Stolles | |
| select | director, president or other officer – if directors of officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary) | |
| ., | Wendy L Prewitt aka Wendy S Holly | |
| | (Typed or printed name of person signing) | |
| | CEO | |
| | (Title of person signing) | |

Department of Health - Office of Vital Statistics

(STATE FILE NUMBER)

STATE OF FLORIDA MARRIAGE RECORD TYPE IN UPPER CASE USE BLACK INK

This license not valid unless seal of Clerk, Circuit or County Court, appears thereon,

2018-000872 CI

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| WENDY LYNN PREWITT | | SMITH | • | 8/29/1964 | | | |
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| ORMOND BEACH VOLUSIA S. NAME OF SPOUSE (First, Middle, Last) | | VOLUSIA | FLORIDA | | VIRGINIA | | |
| MICHAEL ANTHONY HOLLY | | | SO, MAIDEN SURNAME (V applicable) | | S. DATE OF SIRTH MADDIN Day, Year, | | |
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| INFORMATION BELOW FOR USE BY VITAL STATISTICS ONLY - NOT TO BE RECORDED | | | | | | | |

THIS SECTION IS CONFIDENTIAL PER F.S. 741.04



STATE OF FLORIDA, VOLUSIA COUNTY
I HEREBY CERTIFY the foregoing is a true copy
of the original filed in this office. This

Glerk of Circuit and County Court

By Darum-6