P21000046978

| (Requestor's Name) | _ |
|-----------------------------------------|---|
| (Address) | _ |
| (Address) | _ |
| (City/State/Zip/Phone #) | _ |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | | ND I ARHEET | - ASSOCIATES INC |
|--------------------------|---------------------------------------------|--------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| DOCUMENT NUMB | BER: P2 100004 | 6978 | |
| The enclosed Articles of | of Amendment and fee are su | bmitted for filing. | |
| Please return all corres | pondence concerning this ma | tter to the following: | |
| | Jalober Ac | Ker | |
| | JEA ANDT | Name of Contact Persor ARHEEL ASS Firm/ Company | SOCIATES INC |
| | 8515 State | Road 434 S | swite 434 Swite 1070 |
| | Alternate S | Address Olings FL 3 City/State and Zip Code | 2714 |
| | SANTANAS + E-mail address: (to be us | L980, yahoo. | |
| For further information | concerning this matter, pleas | se call: | |
| Jalober 1- | Ackey of Contact Person | at (<u>336</u> Area Coo | 235-8879 de & Daytime Telephone Number |
| Enclosed is a check for | r the following amount made | payable to the Florida Depa | artment of State: |
| □ \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | ☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52,50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mail | ling Address | Street | Address |

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

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

JEAAND TARHEEL ASSOCIATES INC
(Name of Corporation as currently filed with the Florida Dept. of State)

P21000046978

(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:

| its Articles of Incorporation: | , |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| A. If amending name, enter the new name of the corporation: | |
| name must be distinguishable and contain the word "corporation," "cor". Inc., " or Co.," or the designation "Corp," "Inc." or "Co". A perchartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | The new mpany," or "incorporated" or the abbreviation "Corp" professional corporation name must contain the word 419 Wilton Circle Sanfarel, FL 32773 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 851 S. State Road 434 Suite 1070 Altamonte, FL 32714 |
| D. If amending the registered agent and/or registered office address | ss in Florida, enter the name of the |
| new registered agent and/or the new registered office address: Name of New Registered Agent 85 S. State (Florida stree New Registered Office Address: Atamonte Sp | Acker Road 434, Swite 1070 ings , Florida 32714 (Zip Code) |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with Signature of New Reg. Check if applicable | th and accept the obligations of the position. Report 18 100 100 100 100 100 100 100 100 100 |
| ☐ 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.

3

| X Add | V SV Title | Mike Jone Sally Smit | | V | Address C |
|---------------------------------------|------------------|----------------------|-------------|-------------|-------------------|
| Type of Action (Check One) 1) Change | | | <u>√ame</u> | V | |
| (Check One) 1) Change | Title | _ (| • | V | |
| | | | | rer | 419 Wilton Circle |
| Remove | | | | | Senferd, FL 3277 |
| 2) Change Add | | - | | | |
| Remove 3) Change | | | | | |
| Add Remove 4) Change Add | | | | | |
| Remove 5) Change Add | | | | | |
| Remove 6) Change Add Remove | | | | | |

| The date of each amendment(s) adoption:date this document was signed. | , if other than the |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| Effective date <u>if applicable</u> : | |
| (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi document's effective date on the Department of State's records. | II not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action an action was not required. | d shareholder |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. | |
| The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): | |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by** | |
| (voting group) | |
| Dated $10/5/21$ Signature $10/5/21$ | |
| (By director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) | |
| (Typed or printed name of person signing) | |
| Prociden+ | |