P21000047822

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: LAKEWORTH D	IGITAL INC		_					
	BER: P21000047822			_					
	s of Amendment and fee are su	bmitted for filing.							
Please return all corre	espondence concerning this ma	tter to the following:							
	MADHURA KAMAT								
	Name of Contact Person LAKEWORTH DIGITAL INC								
Firm/ Company 492 CYRESS GREEN CIRCLE Address									
					WELLINGTON, FL 33414				
					City/ State and Zip Code				
	E-mail address: (to be us	sed for future annual report	notification)						
	, , , , ,		,						
For further information	on concerning this matter, pleas	se call:							
MADHURA KAMAT		908	240-2776						
Name of Contact Person		at (908) de & Daytime Telephone N	umber 🙃					
			,	TE F					
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:	MAN SEP 25					
S35 Filing Fee	□\$43.75 Filing Fee &	□\$43.75 Filing Fee &	□\$52.50 Filing Fee	25					
	Certificate of Status	Certified Copy	Certificate of Status						
		(Additional copy is	Certified Copy	T					
		enclosed)	(Additional Copy is enclosed)	11. 15					
			is eliciosed)	FH 2:18					
Mailing Address			Address	·					
Amendment Section		Amendment Section							
	vision of Corporations O Box 6327	Division of Corporations The Centre of Tallahassee							
P.O. Box 6327 Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810							
Landhassee, FL 52514		Tallahassee, FL 32303							

Articles of Amendment to Articles of Incorporation of

LAKEWORTH DIGITAL INC.

LAKEWORTH DIGHAL INC		
	s currently filed with the Flo	orida Dept. of State)
P21000047822	_	
(Document	Number of Corporation (if kn	own)
Oursuant to the provisions of section 607,1006, Florida States Articles of Incorporation:	itutes, this Florida Profit Corp	poration adopts the following amendment(s)
A. If amending name, enter the new name of the corpo	oration:	
		Thenew
name must be distinguishable and contain the word "corpo" "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviat	"Co". A professional corp	
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRE	<u></u>	
2. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
). If amending the registered agent and/or registered of		er the name of the
new registered agent and/or the new registered offic	<u>ce address:</u>	
Name of New Registered Agent		
		그는 건물 열 나
 -	(Florida street address)	- N
New Registered Office Address:		ن بر براد براد براد براد براد براد براد ب
	(City)	(Zip Coder 2
		79 P
		- -
Yew Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I an	red Agent:	All and the Arthur materials
пстепу ассері іне арронитені ах гедіметей адені. Тап	a jamutar wun ana accept ine	onigations of the position.
Signatur	e of New Registered Agent, if o	Acmoino
	A second of the	

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:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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 Doe X Remove \mathbf{V} Mike Jones \underline{X} Add <u>SV</u> Sally Smith Type of Action Title <u>Name</u> Address. (Check One) ∇P VENKATESH KAMAT 492 CYPRESS GREEN CIRCLE 1) ____ Change Х WELLINGTON, FL 33414 Add ____ Remove 2) ____ Change ____ Add Remove 3) Change _____ Add ___ Remove 4) ____ Change ____ Add ___ Remove 5) ____ Change ____ Add __ Remove 6) ____ Change ____ Add Remove

amending or adding additional Articles, enter change(s) here: tach additional sheets, if necessary). (Be specific)	
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an amendment provides for an exchange, reclassification, or ca	ancellation of issued shares,
ovisions for implementing the amendment if not contained in	the amendment itself:
(if not applicable, indicate N/A)	- 3
	2021 3.E. J
	27 - 25
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	,

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09/20/2024 The date of each amendment(s) adoption: . if other than the date this document was signed. 09/20/2024 Effective date if applicable: (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 will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) 🗎 The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. ☐ 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 (voting group) Signature (By a 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) MADHURA KAMAT (Typed or printed name of person signing) CEO (Title of person signing)

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