P21000058773

| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Special Instructions to Filing Officer: |
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SECTION OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPO | EastMan Pros, Inc | | | |
|--|---|--|--|--|
| DOCUMENT NUM | P21000058773 BER: | | | |
| The enclosed Article. | s of Amendment and fee are su | ibmitted for filing. | | |
| Please return all corre | espondence concerning this ma | atter to the following: | | |
| | Alphonzo Page Wilkerson | | | |
| | Name of Contact Person EastMan Pros, Inc | | | |
| | 601 21st Street Suite 300 | Firm/ Company | | |
| | Vero Beach, Fl 32960 | Address | | |
| | City/ State and Zip Code | | | |
| | info@eastmanpros.com | | | |
| | E-mail address: (to be us | sed for future annual report | notification) | |
| For further information | on concerning this matter, plea | se call: | | |
| Page Wilkerson | | 772 | 633-2957 | |
| Name | of Contact Person | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check for | or the following amount made | payable to the Florida Dep | artment of State: | |
| ■ \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 | | Ameno Divisio | Address Iment Section on of Corporations entre of Tallahassee | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

| (Name of Corporation as | currently filed with the Fl | orida Dept, of State) |
|--|--------------------------------------|---|
| (Document N | iumber of Corporation (if ki | nown) |
| Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation: | ites, this <i>Florida Profit Cor</i> | poration adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corpora | ation: | |
| | | The new |
| name must be distinguishable and contain the word "corpora" "Inc.," or Co.," or the designation "Corp." "Inc," or "chartered," "professional association," or the abbreviation | "Co". A professional cor, | orporated" or the abbreviation "Corp" |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS | <u> </u> | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| D. If amending the registered agent and/or registered off | fice address in Florida, en | ter the name of the |
| new registered agent and/or the new registered office | address: | |
| Name of New Registered Agent | | |
| | | |
| 113 | lorida street address) | |
| 167 | unuu sireer aaaressi | |
| New Registered Office Address: | 10% | , Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registered | d 4 | |
| I hereby accept the appointment as registered agent. I am fa | amiliar with and accept the | obligations of the position. |
| | | |
| | | |
| Simultage | f New Registered Agent, if c | .h |
| Signature aj | у жем кедіметей Адені, у с | nangmg |
| Check if applicable | | |
| ☐ The amendment(s) is/are being filed pursuant to s. 607.012 | 20 (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 | \underline{V} | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) 1) Change | <u>Title</u> S | Name ARDANNEOUS D. INGRAM | Address MISSING CATHANIA CAMERINANIA ACTIONS O |
| Add X Remove X Change | PS | Alphonzo Page Wilkerson | 9611 North U.S. His hway 1 Suite 201 sebastia FL 3265 |
| Add Remove 3) Change Add | | | —————————————————————————————————————— |
| Remove 4) Change Add | | | |
| Remove 5) Change Add | | | 2023 HOV 19 |
| Remove 6) Change Add | | | OF STATE |
| Remove | | | |

| (Attach additional sheets, if necessary). | cles, enter change(s) here: (Be specific) |
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| If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A) | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself: |
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| The date of each amendment(s) | adoption: | if other than the |
|--|---|----------------------------------|
| date this document was signed. 11- | 18-2021 | |
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the E | block does not meet the applicable statutory filing requirements, this epartment of State's records. | s date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were ad action was not required. | opted by the incorporators, or board of directors without shareholder | action and shareholder |
| ☐ The amendment(s) was/were ad by the shareholders was/were s | opted by the shareholders. The number of votes east for the amendmufficient for approval. | ent(s) |
| | proved by the shareholders through voting groups. The following star reach voting group entitled to vote separately on the amendment(s): | tement |
| "The number of votes cas | for the amendment(s) was/were sufficient for approval | |
| by | | |
| | (voting group) | |
| 11-18-202 | I | |
| Dated | | |
| þ | FOR A POR I MAROLAN | |
| Signature | lirector, president or other officer – if directors or officers have not be | |
| | ed, by an incorporator – if in the hands of a receiver, trustee, or other c | |
| | sted fiduciary by that fiduciary) | |
| | Alphonzo Page Wilkerson | |
| | (Typed or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |