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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

My Grandmas House Inc.	
	
	Art of Inc. File
	LTD Parmership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File Art, of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search Officer Search
	Fictitious Search
	Fictitious Owner Search
Signature	Vehicle Search
	— Driving Record
Requested by: SETH	UCC 1 or 3 File
induction of SEIH	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

Articles of Amendment to Articles of Incorporation of

MY GRANDMA'S HOUSE	R	A	NΓ	MA	21	HOL	ISE	1NC	
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	ntly filed with the Florida Dept. of State)	
P21000066108		
(Document Numbe	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	nis Florida Profit Corporation adopts the following amen	dinent(s
A. If amending name, enter the new name of the corporation:		
NA .		
ame must be distinguishable and contain the word "corporation," Inc.," or Co.," or the designation "Corp." "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.,	d professional composition name and a succession at	
Enter new principal office address, if applicable:	NA 53	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	82	2
) =
Enter new mailing address, if applicable:	NA C	<i>7</i> 1
(Mailing address MAY BE A POST OFFICE BOX)	INA	
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		<u>-</u>
If amending the registered agent and/or registered office addresses registered agent and/or the new registered office addresses.	dress in Florida enter the name of the	
new registered agent and/or the new registered office addre	dress in Florida enter the name of the	——————————————————————————————————————
. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address NA Name of New Registered Agent	dress in Florida enter the name of the	16
Name of New Registered Agent NA	dress in Florida, enter the name of the ss:	
Name of New Registered Agent NA	dress in Florida enter the name of the	
Name of New Registered Agent NA	dress in Florida, enter the name of the ss: street address)	14,
Name of New Registered Agent (Florida s	dress in Florida, enter the name of the ss: treet address)	-
Name of New Registered Agent (Florida s	dress in Florida, enter the name of the sss: dreet address)	-
Name of New Registered Agent Now Registered Agent (Florida s New Registered Office Address:	dress in Florida, enter the name of the ss: street address) , Florida (City) (Zip Code)	
Name of New Registered Agent Now Registered Office Address: New Registered Office Address:	dress in Florida, enter the name of the ss: dreet address) (City) , Florida (Zip Code)	-
Name of New Registered Agent Now Registered Office Address: New Registered Office Address:	dress in Florida, enter the name of the ss: dreet address) (City) , Florida (Zip Code)	-
Name of New Registered Agent (Florida s	dress in Florida, enter the name of the ss: dreet address) (City) , Florida (Zip Code)	-
NA Name of New Registered Agent Now Registered Agent New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent are appointment as registered agent. I am familiar	dress in Florida, enter the name of the ss: dreet address) , Florida (City) Cip Code) H: with and accept the obligations of the position	-
NA Name of New Registered Agent Now Registered Agent New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent are appointment as registered agent. I am familiar	dress in Florida, enter the name of the ss: dreet address) (City) , Florida (Zip Code)	-

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 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>	<u>John Doe</u>	
X Remove	$\underline{\mathbf{y}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	Felix Diaz	229 Amelia Street, 2A
Add			Key West, FL 33040
X Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	_		
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)			
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		-		
If an amendment provides for an excha	inge, reclassification,	or cancellation of	issued shares.	
provisions for implementing the amen	dment if not containe	ed in the amendme	ent itself:	
(1)				
(y noi appacaoie, maicate NA)				
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(if not applicable, indicate N/A)				
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The date of each amendment(s) adopti date this document was signed.	on:	, if other than	the
Effective date if applicable:			
	tho more than 90 days o	atter amendment file datet	
Note: If the date inserted in this block document's effective date on the Department	does not meet the applicable su nent of State's records.	atutory filing requirements, this date will not be listed as	the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was were adopted action was not required.	by the incorporators, or board of	f directors without shareholder action and shareholder	
The amendment(s) was were adopted by the shareholders was/were sufficient	by the shareholders. The number nt for approval.	er of votes cast for the amendment(s)	
The amendment(s) was were approved must be separately provided for each	t by the shareholders through vo voting group entitled to vote sep	ning groups. The following statement parties on the amenaments.	
"The number of votes cast for th			
by	(voting group)		
Dated 12/15/	2027		
Signature 1/1/22	aldinon		
selected, by a	, president or other officer—if d in incorporator – if in the hands o uctary by that fiduciary)	firectors or officers have not been of a receiver, trustee, or other court	
Shan	ac Johnson		
	(Typed or printed name of	person signing)	
Presic	deni		

(Title of person signing)