P210000 679104

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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A. Butter 9115121

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: JOAN HARTT GR	OVE, INC.	
	1BER: P21000067964		
	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	Jennifer McCrory		
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	1
	Dial Consulting Partners, Inc		
	-	Firm/ Company	
	3802 Crossroads Parkway	The second of th	
		Address	
	Fort Pierce, FL 34945		
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code	2
	jennifer@atlanticpayrollpartn	ers.us	
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
Jennifer McCrory		at (772	de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	S43.75 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 Tallahassee, FL 32314		Amend Divisio The Co	Address Iment Section In of Corporations Entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

JOAN HARTI GROVE, INC.			
(Name o	of Corporation as currentl	y filed with the Florida Dept.	of State)
P21000067964			ZUZI SEP - 1 PM 4: (
	(Document Number of	Corporation (if known)	SECRETARY OF STATE
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation ado	pts the following amendment(s
A. If amending name, enter the new na	ame of the corporation:		
N/A			271
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contain chartered," "professional association,"	Corp," "Inc," or "Co". A		
B. Enter new principal office address,	if annlicable:	N/A	
(Principal office address MUST BE A S			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A	
D. If amending the registered agent an new registered agent and/or the new			of the
Name of New Registered Agent	Joan Hartt		
	1245 Lake Lotela Drive		
	(Florida stre	eet address)	
New Registered Office Address:	Avon Park	,	Florida 33825
New Registerea Office Address.		(City)	(Zip Code)
New Registered Agent's Signature, if c. I hereby accept the appointment as regist			of the position.
	Son 14.	egistered Agent, if changing	
	– Signature of New Re	zgisierea Ageni, ij changing	
Check if applicable ☐ The amendment(s) is/are being filed p	ursuant 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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>uith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) X Change	PVST		Joan Hartt	PO Box 1429
Add				Avon Park, FL 33826
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change	-	-		
Add				
Remove				

mendment	dditional sheets, if necessar				
	to correct resgistered agent	t name as well as PV	ST name.		
				<u> </u>	
					
					
				,-	
					
_				·	
					<u> </u>
If an ame	endment provides for an e	exchange, reclassific	cation, or cancellati	ion of issued shares,	
provisio (if n	ons for implementing the solot applicable, indicate N/A	amendment it not co	ontained in the ame	endment itself:	
/A	,	,			
					
				· · ·	

.

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amenda	nent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors was not required.	ithout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes comby the shareholders was/were sufficient for approval.	ist for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on t	
"The number of votes east for the amendment(s) was/were sufficient for app	roval
by	,
(voting group)	
Dated_ 8-24-2021	
Signature Day H. Hadl	
(By a director, president or other officer – if directors or eselected, by an incorporator – if in the hands of a receive	
appointed fiduciary by that fiduciary)	,, 1125,000, 01, 01,101, 00,001
Joan Hartt	
(Typed or printed name of person sign	ing)
PVST	

(Title of person signing)