17210000080217

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: C. KAM MANAG	EMENT, INC.		
DOCUMENT NUM	1BER: P21000080217			
	es of Amendment and fee are su	abmitted for filing.		
Please return all cor	respondence concerning this ma	atter to the following:		
	CONNER R. KEMPE, ESQ.			
	 	Name of Contact Perso	n	
	JOSEPH C. KEMPE, P.A.			
	Firm/ Company			
	941 N. HIGHWAY A1A	. ,		
		Address	-	
	JUPITER, FL 33477			
		City/ State and Zip Cod	e	
	CONNERKEMPE@KEMPELAW.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informat	ion concerning this matter, plea	se call: at (679-2432	
Nam	e of Contact Person		de & Daytime Telephone Number	
	for the following amount made		•	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fec Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	

Articles of Amendment to Articles of Incorporation of

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C. KAM MANAGEMENT, INC.	2022 APR -4 PM 12: 29
(Name of Corporation as currently	r filed with the Florida Dept. of State)
P21000080217	TALL STATE
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co" Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</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 office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida
	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	
Signature of New Reg	gistered Agent, if changing

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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	D	DR. CHECK C. KAM	1881 Southeast Gaskins Circle
X Add			Port St. lucie FL 34952
Remove			
2) Change	D	LOURDES P. KAM	1881 Southeast Gaskins Circle
X Add			Port St. lucie FL 34952
Remove 3) Change			
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessar	Articles, enter change(s) here: ry). (Be specific)
	
•	
an amondment provides for an e	exchange, reclassification, or cancellation of issued shares,
provisions for implementing the a	amendment if not contained in the amendment itself:
(if not applicable, indicate N/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 amendment fi	le date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing request Department of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for e sufficient for approval.	the amendment(s)
	approved by the shareholders through voting groups. The j for each voting group entitled to vote separately on the am	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated	Parch 22, 2022	
(By sele	a director, president or other officer – if directors or officer cted, by an incorporator – if in the hands of a receiver, trust binted fiduciary by that fiduciary)	
	CHECK C. KAM	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	