**Division of Corporations** Electronic Filing Cover Sheet

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN HARVEST SINGULARITY INC.

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION:	HARVEST SINGULARII	Y INC.			
DOCUMENT NUM		P21000095227				
The enclosed Article	s of Amendment and fee are st	ibmitted for filing.				
Please return all corr	respondence concerning this ma	atter to the following:				
	LOVETTE DOBSON					
		Name of Contact Person	n			
		Firm/ Company	··			
	17350 STATE HWY 249 ST	E 220			207	
		Address		— <u>沪</u>	23 #	و
	HOUSTON TX, 77064			•	AR.	
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For further informati	on concerning this matter, plea	se call:		÷ .	£	
LOVETTE DOBSO	N	at (	888-462-3453 ) de & Daytime Telephone Nur			
Name of Contact Person		Area Co	de & Daytime Telephone Nur	nbei		
Enclosed is a cheek t	for the following amount made	payable to the Florida Dep.	artment of State:			
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite \$10	)		

Tallahassee, FL 32303

## Articles of Amendment

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HARVEST SINGULARITY INC.  (Name of Corporation as currently filed with the Florida Dept, of State)  P21000095227  (Document Number of Corporation (if known)  Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendme its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P A"	 ((s) to
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B. Enter new principal office address, if applicable: 100 South Ashley Drive, Suite 600	
(Principal office address MUST BE A STREET ADDRESS ) Wells Fargo Center Fower	
Tampa, FL 33602	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  100 South Ashley Drive, Suite 600	
Wells Fargo Center Tower	
Tampa, FL 33602	TELES.
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:    Name of New Registered Agent   REPUBLIC REGISTERED AGENT LLC   REPUBLIC REGISTERED AGENT R	
Name of New Registered Agent REPUBLIC REGISTERED AGENT LLC	
1350 Nw 72nd Ave Tower I Ste 455	
(Florida street address)  New Registered Office Address:  Miami Florida Florida	
(City) (Zip Code)	

Check if applicable

 $\square$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT Jol	nn Doc	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
<u>X</u> Add	<u>SV</u> <u>Sa</u>	Hy Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	D VP	Sergio Emesto Pelaez	4020 Vana Di
Add			Sarasota, FL 34241
Remove			7182 Heron Walk Lane R
2) X Change	D P	Charles Albert Garza	
Add			Wesley Chapel, FL 33545 N
Remove 3 ) Change	D S	Ann Marie Sullivan	100 Wanen Street, Aux1006
X Add	<u> </u>		Jersey City, NJ 07094
Remove 4) Change	DT	Michelle Cox Carlton	6834 Bushnell Drive
X Add			Lakeland, FL 33813
Remove			
5) Change			
Add			
Remove			
6)Change	<del></del>		<del></del>
Add			
Remove			

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(if not applicable, indicate N/A)	
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The date of each amendment(s) a	doption:	if other than the		
late this document was signed.		(((H23000079432 3)))		
Effective date if applicable:				
	'no more than 90 days after amendmo	n file daw		
Note: If the date inserted in this to document's effective date on the D	slock does not meet the applicable statutory filing repartment of State's records.	equirements, this date will not be listed as the		
Adoption of Amendment(s)	(CHECK ONE)			
■ The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors with	out shareholder action and shareholder		
☐ The amendment(s) was/were ad by the shareholders was/were si	opted by the shareholders. The number of votes cast officient for approval.	for the amendment(s)		
	proved by the shareholders through voting groups. To each voting group entitled to vote separately on the			
"The number of votes cast	for the amendment(s) was were sufficient for appro-	ral		
bv				
·	(voting group)	<del></del>		
MARCH I Dated	st 2023	202'		
Signature <u>Ch</u>	rdes Albert Larga	<b>□</b>   1		
selecte	irector, president or other officer – if directors or off d. by an incorporator – if in the hands of a receiver, t ed fiduciary by that fiduciary)	rustee, or other coudt-		
	Charles Albert Garza	AN 8: 45		
	(Typed or printed name of person signing	5		
	President			
	(Title of person signing)			