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of 4/16/2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	Advanced Florida Services Inc
DOCUMENT NUMBER:	P22000009709
The enclosed Articles of Amendme	t and fee are submitted for filing.
Please return all correspondence co	cerning this matter to the following:
	Heather Richardson Name of Contact Person Advanced Florida Services Firm/ Company 10200 11) Fishbowl Dr NI Address Hormosassa, FL 3448 City/ State and Zip Code Heather @ Adv FI Sucs. com
E-mail	dress: (to be used for future annual report notification)
For further information concerning	nis matter, please call:
Hrather Richa Name of Contact Po	at (1016) 890-1571 Area Code & Daytime Telephone Number
Enclosed is a check for the following	amount made payable to the Florida Department of State:
•	Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee cate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Sect Division of Corpe P.O. Box 6327 Tallahassee, FL 3	ations Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32303



RECEIVED

2022 APR 12 PM 12: 03

SECTE TALLAHASSET, FL

March 10, 2022

HEATHER RICHARDSON 411 WALNUT STREET SUITE 14657 GREEN COVE SPRINGS, FL 32043

SUBJECT: ADVANCED FLORIDA SERVICES, INC

Ref. Number: P22000009709

We have received your document for ADVANCED FLORIDA SERVICES, INC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 222A00005755

Proper form is Ottached.

Please apply chief previously Provided.

Articles of Amendment to Articles of Incorporation of

FILED

Advanced Flori	
(Name of Corporation as current)	y filed with the Florida Dept. of State)
P220C00	DO 9709 TALT STAGE STATE
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this 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," "o "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	10200 W Fishboul Dr
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Lot NI Richardson
	Homosassa, FL 3448
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10200 W Fishbowl Dr
	Lot N1 Richardson
	Homosassa, FL 34418
	4-101MD31554, FL 37F13
D. If amending the registered agent and/or registered office addinew registered agent and/or the new registered office address	
Name of New Registered Agent JOWN K K	ichardson JR
	Fishbour Dr , Lot Mi
	eet address)
New Registered Office Address: HomcSasSa	
	(city)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar y	with and accept the obligations of the position.
Signature of New Ro	egistered Agent, if changing
Chack if applicable	

 \square 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 De	<u>oc</u>	
X Remove	<u>V</u>	Mike_Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	Title		Name	Address
1) X Change	P		John RRichardson JR	10200 W Fishboul Dr
Add				
Remove				Jamosassa, FL 3448
2) <u>(</u> Change	1/5	<u>ī</u>	Honther Richardson	10200 W Fishbowl D
Add				Lot NI
Remove Change				Homosassa, FL 3448
Add				
Remove				
4) Change	•••			
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach <i>additio</i>	or adding additional Aronal sheets, if necessary).	(Be specific)	 .		
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f an amendn	nent provides for an exc	change reclassificati	on or cancellation o	of issued shares	
provisions fa	or implementing the am	endment if not cont:	ained in the amendr	nent itself:	
(if not ap	pplicable, indicate N/A)				
				-	
		· <u>····</u>			

. . .

The date of each amendment(s) adoption: 2/23/2022	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date w document's effective date on the Department of State's records.	rill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action as action was not required.	nd shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by'''	
by" (voting group)	
Dated 4/4/2022 Signature Arch Resh	
Signature ASSA POL	
(By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Heather Richardson, UP (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Vine President	
(Title of person signing)	

* * * * * *