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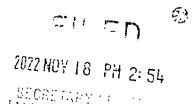
TO: Amendment Section **Division of Corporations**

Tallahassee, FL 32314

NAME OF CORPORATION: _	MY HOME'S EVO	DLUTION II, INC		
DOCUMENT NUMBER: P2200	00010394			
The enclosed Articles of Amendm		bmitted for filing.		
Please return all correspondence c	oncerning this ma	tter to the following:		
JAKUBIET	Z, REINER A			
-		Name of Contact Persor	<u> </u>	
		Firm/ Company		
417 SE CO	CONUTAVE ST	E 4	<u> </u>	
		Address		
STUART,	FL 34996			
		City/ State and Zip Cod		
REINER@	JAKUBIETZ.CO	М		
E-mai	l address: (to be us	sed for future annual report	notification)	
For further information concernin	g this matter, pleas	se call:		
JAKUBIETZ. REINER A		at (9247989	
Name of Contact Person		at (561) 9247989 Area Code & Daytime Telephone Number		
Enclosed is a check for the follow	ing amount : rade	payable to the Florida Depa	artment of State:	
•	.75 Filing Fee & ificate 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



MY HOME'S EVOLUTION IL INC.

(Name of Corporation as curren		<u>- [11] (6) (6) (12) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7</u>
	itly filed with the Florida Dept.	
222000010394		
(Document Number	of Corporation (if known)	
tursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation add	opts the following amendment(s
. If amending name, enter the new name of the corporation;		
AKUBIETZ CONSULTING, INC		The new
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.A	A professional corporation nat	or the abbreviation "Corp.,"
i. Enter new principal office address, if applicable; Principal office address <u>MUST BF, A STREET ADDRESS</u>)		
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address.	dress in Florida, enter the namess:	e of the
Name of New Registered Agent		
_		
(Florida :	street address)	
		Florida
New Registered Office Address:	(City)	(Zip Code)

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	PT	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
_X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	Litle		Name	<u>Addres</u> s
I) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
Change				
Add	<u></u>	_		
Remove				
6) Change				
Add				
Remove				
KCITDVC				

	If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)				
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provisions for implen	nenting the amer	nange, reclassificat	ion, or cancellation	ment itself:	

	NOVEMBER 2ND, 2022	
The date of each amendment(s date this document was signed.) adoption:	, if other than the
,	IOVEMBER 2ND, 2022	
Effective date <u>if applicable</u> :	(no more than 90 days after emendment fi	ile date)
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing required Department of State's records.	nirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ 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/were	adopted by the shareholders. The number of votes cast for sufficient for approval.	the amendment(s)
	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the am	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	•
	(voting group)	
11/02/22	!	
Dated		
Signatur c		
(By scic	a director, president or other officer – if directors or officer cted, by an incorporator – if in the hands of a receiver, trus pinted fiduciary by that fiduciary)	
	JAKUBIETZ, REINER A	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	