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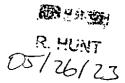
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

•

NAME OF CORPORA	TION: 306 KILLINGER	AVE, INC.	
DOCUMENT NUMBE	R: P22000010480		
	Amendment and fee are su	bmitted for filing.	
Please return all correspo	endence concerning this ma	tter to the following:	
JA	MES H COLLIER SR		
		Name of Contact Perso	n
CC	OLLIER'S ACCOUNTING		
		Firm/ Company	
88	12 SHENANDOAH LANI		
		Address	
н	JDSON, FL 34667		
		City/ State and Zip Cod	e
JC	OLL158@YAHOO.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information co	oncerning this matter, pleas	se call:	
JAMES H COLLIER SR		at ( <sup>727</sup>	868-6020
Name of (	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for th	e following amount made p	payable to the Florida Dep	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amend Division P.O. Bo	z Address ment Section n of Corporations ox 6327 ssee, FL 32314	Amend Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment Articles of Incorporation

	of	
306 KILLINGER AVE, INC.		
(Name of Corporation	n as currently filed with the Flo	orida Dept. of State)
P22000010480		
(Docume	ent Number of Corporation (if kn	own)
Pursuant to the provisions of section 607.1006, Florida sits Articles of Incorporation:	Statutes, this <i>Florida Profit Corp</i>	noration adopts the following amendment(s)
A. If amending name, enter the new name of the cor	poration:	
HARPER CROSS HOME INVESTMENTS, INC		T7
name must be distinguishable and contain the word "cor "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrevi	or "Co". A professional corp	The new proporated" or the abbreviation "Corp.," poration name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	<u></u>	
		29
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	)	
	g address, if applicable:  AAY BE A POST OFFICE BOX  COMPANY  COMP	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	d office address in Florida, ente fice address:	
Name of New Registered Agent		
	(Florida street address)	
		. Florida
New Registered Office Address:		

Signature of New Registered Agent, if changing

Check if applicable

<sup>☐</sup> 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>	<u>John Do</u>	<u>0e</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1)Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change	·	_		
Add				
Remove				
(i) Change		_		
Add				
Remove				

Attach additional sheets, if necessary,	). (Be specific)				
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an amendment provides for an exprovisions for implementing the an	change, reclassific	cation, or cancel ontained in the	<u>llation of issue</u> amendment it	<u>ed shares.</u> self:	
(if not applicable, indicate N/A)					
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05/22/2023 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 file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) ■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.  $\Box$  The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 (voting group) Dated

Signature

(By a director, president or other officer - if directors or officers have not been selected, by an incorporated - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

JENNIFER J CROSS

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)