Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000230587 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : RASI

Account Number : I20220000023 : (800)221-2972 Fax Number : (917)243-5843

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

| Email Address: |
|----------------|
|----------------|

COR AMND/RESTATE/CORRECT OR O/D RESIGN HAVEN SOUTH REALTY INC

Certificate of Status Certified Copy Page Count 04 Estimated Charge \$35.00

Electronic Filing Menu Corporate Filing Menu



Lexitas 1/001: Fax Server From: Veronica Gonz

June 28, 2023

FLORIDA DEPARTMENT OF STATE Division of Corporations

HAVEN SOUTH REALTY INC 6691 WESTVIEW DRIVE LAKE WORTH, FL 33462

SUBJECT: HAVEN SOUTH REALTY INC

REF: P22000013725

We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

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.

Tammi Cline FAX Aud. #: H23000220510

Regulatory Specialist II Supervisor Letter Number: 623A00014656

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

Articles of Amendment to Articles of Incorporation of

| н | AVEN | SOUTH | HPEAT | TY INC |
|---|----------|-------|-------|----------|
| п | N V ELLY | SURFI | пксаг | I Y LIVU |

| (Name of Corporation : | as currently filed with the F | lorida Dept. of State) | |
|--|--|--|----------------------------|
| P22000013725 | | | |
| (Document | Number of Corporation (if k | nown) | |
| Pursuant to the provisions of section 607.1006, Florida Statis Articles of Incorporation: | atutes, this Florida Profit Cor | poration adopts the following | ig amendment(s) |
| A. If amending name, enter the new name of the corpo | oration: | | |
| The state of the s | | | _The new |
| name must be distinguishable and contain the word "corpo" "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviat | "Co". A professional cor | orporated" or the abbrewall poration name must contai | on "Corp.," In the word |
| B. Enter new principal office address, if applicable: | | | |
| (Principal office address <u>MUST BE A STREET ADDRE</u> | <u>:\$2</u>) | _ | 202 |
| | | i- | الله الله |
| | | | 2 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | ÷. | |
| (muning namess MAT BE A POST OFFICE BOA) | | | |
| | | | <u> </u> |
| | | <u> </u> | <u>-</u> |
| D. If amending the registered agent and/or registered | office address in Florida, so | 4 4b 6 4b - | |
| new registered agent and/or the new registered office | | ter the name of the | |
| Name of New Registered Agent | | | _ |
| | | | ~ |
| | (Florida street address) | | - |
| New Registered Office Address: | | , Florida | |
| | (Ciņi) | (7.ip) | Code) |
| | | | |
| Non-Depletanced Associate Company of the Depletance Depletance | | | |
| New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an | rea Ageuc. I familiar with and accept the | obligations of the position. | |
| | | | |
| | | | |
| | A1 P | | - |
| Signature | e of New Registered Agent, if | cuanging | |
| Check if applicable | | | |

To:

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:

Lexitas

(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= Treosurer; 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, P as Remove, and Sally Smith, SV as an Add.

| X Change | <u>PT</u> | John Doc | |
|-------------------------------|--------------|--------------|----------------------|
| X Remove | Ϋ́ | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| 1) Change | VP | MICHAEL BESS | 6691 WESTVIEW DRIVE |
| Add | | | LAKE WORTH, FL 33462 |
| X Remove | | | 202 |
| 2) Change | | | 2023 JUN 29 |
| Add | | | 2 |
| Remove 3) Change | | | |
| Add | | | |
| Келюче | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | <u> </u> | |
| Add | | | |
| Remove | | | |

From: Veronica Gonz

| The date of each amendment(x) date this document was signed. | edoptless: | | If other t | han the |
|---|--|-------------|--------------|---------------------------------------|
| Effective date if upplicable: | (no more than 90 days after amendment file date) | · — | | |
| Note: If the date inserted in this document's effective date on the | t block does not meet the applicable statutory filing requirements, this di | ate will no | it he listee | l as the |
| Adoption of Amendment(s) | (CHECK ONE) | | | |
| The amendment(s) was/were a action was not required. | dopted by the incorporators, or board of directors without shareholder act | ion and sh | archolder | |
| The uniondment(s) was/were a by the shareholders was/were | dopted by the shareholders. The number of votes east for the amendment sufficient for approval. | (s) | | |
| | pproved by the shareholders through voting groups. The fallowing statem or each voting group entitled to vote separately on the amendment(s): | १८मा | 202 | |
| The number of votes car | st for the amendment(s) was/were sufficient for approval | 3 | 2023 JUN 29 | <u> </u> |
| by | (voting group) | | 29 NH | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| 6/19/202 Dated | 3 | ı ' | 9. | المجاسب |
| Signature | Ruth Warwick | | 5 | |
| selecti | director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary) | | | |
| | RUTH WARWICK | | | |
| | (Typed or printed name of person signing) | | | |
| | President | | | |
| | (Title of person signing) | | | |