P220000 22193

(Requestor's Name)			
(Address)			
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(latitude)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
(======================================			
Codification of Change			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

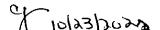
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: DANIEL CARPEN	TRY INC				
DOCUMENT NUMB	ER: P22000022193					
The enclosed Articles of	f.Amendment and fee are sub	mitted for filing.				
Please return all corresp	ondence concerning this mat	ter to the following:				
i	DANIEL ROMERO					
-	Name of Contact Person					
-		Firm/ Company				
<u> </u>	5461 CATTS ST					
_	Address					
1	NAPLES, FL 34113					
		City/ State and Zip Code	•			
!	DANIEL_ROMERODIAZ@					
-	E-mail address: (to be us	ed for future annual report	notification)			
For further information	concerning this matter, pleas	e call:				
DANIEL ROMERO		at (367-3175			
Name of Contact Person		Area Coo	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate 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

DANIEL CARPENTRY INC

2022 J.L 25 FY 9: 07

(Name of Corporation as currently	filed with the Florida Dept. of State)
P22000022193	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>F</i> its Articles of Incorporation:	Clorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "co". "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address:	
Name of New Registered Agent	
(Florida stre	et adaress)
New Registered Office Address: (, Florida
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered Agent, if changing
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c)	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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	mith_	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP	_	CONSTANTINO ROMERO NAVAI	5461 CATTS ST
X Add				NAPLES, FL 34113
Remove				
2) Change		_		
Add				
Remove 3) Change			, 	
Add				
Remove				
4) Change				
Add				<u>. </u>
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

If amos dies	dana and distributed A. 1.1.4.				
<u>11 amending or add</u> (Attach <i>additional sh</i>	ing additional Article reets, if necessary).	es, enter change(s) l (Be specific)	<u>tere</u> :		
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16		madawifasia	au au aciliation of i	anned above.	
provisions for imp	rovides for an exchar lementing the amend	ige, reclassification, lment if not contain	ed in the amendmen	ssued shares, it itself:	
(if not applicab	le, indicate N/A)				
				•	
				····	- -

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
(Effective date <u>if applicable</u> : _	7/14/2022	
Enective date <u>it applicame</u> .	(no more than 90 days after amendment file	date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing require Department of State's records.	ements, 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 s	hareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the sufficient for approval.	he amendment(s)
	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the amer	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
0 Dated	7/14/2022	
Signature(By sele	a director, president or other officer – if directors or officers cted, by an incorporator – if in the hands of a receiver, truste ointed fiduciary by that fiduciary)	
	DANIEL ROMERO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	