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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: ▼ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

## Articles of Amendment

to

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Articles	of	Incorporat	ior
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	of	55.5 10 0E 70 E. 07
Sun Borina	INC	2022 JTT, 25 JTT 8: 20
(Name of Corporation as	s currently filed with the Florida	Dept. of State)
Pazoco	24016	
(Document )	Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tutes, this <i>Florida Profit Corporati</i>	ion adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ration:	
name must be distinguishable and contain the word "corpor "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviati	"Co". A professional corporati	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u>	<u> </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 of new registered agent and/or the new registered office		e name of the
Name of New Registered Agent		
	Florida street address)	
New Registered Office Address:		. Florida
New Registered Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	ed Agent: familiar with and accept the oblig	ations of the position.

Signature of New Registered Agent, if changing

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.

X Change	PT John Doe	
$\underline{X}$ Remove	<u>V</u> <u>Mike Jones</u>	
X Add	<u>SV</u> <u>Sally Smith</u>	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
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Add	(Exertive secutary)	Malesh Cl 33011
Remove	•	
2) Change		
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Remove Change		
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4) Change		<del></del>
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The date of each amendment(s) adopt date this document was signed.	ion:	<del></del> .	<u> </u>	it other than the
Effective date if applicable:				
<del></del>	(no more than 90 days afte	er amendment file	date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statument of State's records.	ntory filing require	ements, this date v	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of d	irectors without sh	areholder action a	and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffici		of votes east for the	e amendment(s)	
☐ The amendment(s) was/were approve must be separately provided for each				
"The number of votes east for t	he amendment(s) was/were sufficie	nt for approval		
by				
	(voting group)			
DatedSignature	Aid C	/20/2	~	
selected, by	hresident brother officer – if dir an incorporator – if in the hands of fluciary by that fiduciary)	ectors or officers h 7 receiver, trustee	nave not been , or other court	
	Typed or printed name of po	erson signing)	JESUS	Alleque
	(Title of person signing)			

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