## P2200031745

(Requestor's Name)	
(Address)	·
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	AIL
(Business Entity Name)	
(Document Number)	
(Bocament Nomber)	
Certified Copies Certificates of Status _	
Special Instructions to Filing Officer:	
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## COVER LETTER

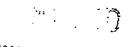
TO: Amendment Section Division of Corpor				
NAME OF CORPORA	ATION: ST. HA		<u>npany</u>	
DOCUMENT NUMBE	ir: <u>P2200</u> (	<u> </u>		
The enclosed Articles of	f Amendment and fee are sub	mitted for filing.		
Please return all corresp	ondence concerning this man	ter to the following:		
-	NAHALTA	UTRERA E Name of Contact Person	59.	
		, ,	AgPA	
<u>F</u>	FORTH FLOOR,	840 CORAL Address	WAY	
_	Miami FL	orida 331	45	
ı	MAILING ADDRES	City/ State and Zip Code 4 みのおって	45 150605 Mismi F	1 2220E
-		ed for future annual report		0605
For further information	concerning this matter, pleas	e call:		
			) 851 - 6000 de & Daytime Telephone Number	_
FAX - 355 Enclosed is a check for	the following amount made	payable to the Florida Depa	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)	
Mail	ing Address	Street	<u>Address</u>	

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

DR Pens pub Banks-7-22-22 President CHAIMAN

## Articles of Amendment to Articles of Incorporation of



2022 JUL 22 AH 10: 44

ST. HARDY COMPANY	1710-44
(Name of Corporation as currently filed with the Florida Dept. of State)	2 WIE
P220000 31765	, FL
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendits Articles of Incorporation:	dment(s) to
A. If amending name, enter the new name of the corporation:	
The	new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Cor" lnc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the way "chartered," "professional association," or the abbreviation "P.A."	rp ," vord
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)	<del></del>
	<del></del>
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent	
- The state of the	
(Florida street address)	
New Registered Office Address:	
New Registered Office Address. (City) (Zip Code)	_
New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations 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.	

Perus Dole Banko : 7-22-2022 President CHAIRMAN

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. RFOD = REGIONALF. PORTUS OFFICER DIRECTOR
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: <u>PT</u> John Doe X Change Mike Jones X Remove <u>X</u> Add  $\underline{SV}$ Sally Smith <u>Address</u> Title Type of Action <u>Name</u> (Check One) REOD BONALD CORRIGAN 8503 Km bo RD 1) X Change Regional Financial officeR suite A X\_ Add DIRECTOR TALAHASSER FL 32305 \_\_\_ Remove 2) \_\_\_\_ Change Add Remove 3) Change \_\_\_\_ Add \_\_\_\_ Remove 4) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove 5) \_\_\_\_ Change \_\_\_\_ Add \_\_ Remove 6) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director, TR= Trustee; C = Chairman or Clerk; CEO = Chief

address of each Officer and/or Director being added:

Please note the officer/director title by the first letter of the office title:

(Attach additional sheets, if necessary)

DR. Perus polo Bankar 7-22-2022 President CHAI MAN

SEE	Additional SHEET ATTATCH	
	Amending Anticle 2-Purpose of Corps:	<del>3)</del>
	7	
,		
		<b>~</b>
an amendment pro	ides for an exchange, reclassification, or cancellation of issued shares.  nenting the amendment if not contained in the amendment itself:	
(if not applicable	indicate N/A)	
$\mathcal{N}/A$		
,		

•••

President CHAIRMAN

The date of each amendment(s) adoption:	July	22,	2022		, if other than the
date this document was signed.		· · · · ·			
Effective date <u>if applicable</u> :	July (no more than S	<mark>QQ</mark> 10 days afti	2025 er amendment	jile date)	<del></del>
Note: If the date inserted in this block does i document's effective date on the Department o		cable statu	nory filmg rec	quirements, this date will	not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)				
The amendment(s) was/were adopted by the action was not required.	e incorporators, or	board of d	lirectors witho	ut shareholder action and	. shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		ie number	of votes cast I	or the amendment(s)	
☐ The amendment(s) was/were approved by the must be separately provided for each voting	he shareholders th g group entitled to	rough voti vote sepa	ng groups. <i>Th</i> rately on the a	e following statement imendment(s):	
"The number of votes cast for the ame	endment(s) was/w	ere sufficio	ent for approve	11	
by					
(ve	ting group)				
Dated July 22,	ons 19	 اسان	Bank	ــــــــــــــــــــــــــــــــــــــ	
(By a director, pre	sident or other off corporator – if in t	ficer – if di he hands o	rectors or offic	cers have not been rustee, or other court	
DR	PERV	es f d name of p	OA LE person signing	BANKS	
Pre	(Title of person s		HAIRM	LAC.	

BR. Perus Bule Barris 7-22:2020 President, CHAIRMAN OFBOATO