P220000035292

(Red	questor's Name)	
(Add	dress)	
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(Address)		
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Bu	siness Entity Nar	ne)
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ASSET ADVISOR	Y CORP		
	BER: P22000035292			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	MARINE PECLET			
		Name of Contact Perso	on	
	HB CAPITAL MANAGEMENT LLC			
		Firm Company		
	16701 COLLINS AVENUE	, ,		
		Address		
	SUNNY ISLES BEACH FL	33160		
		City State and Zip Co	de	
	MPECLET@HBCAPITAL.C	OM		
		sed for future annual repo	rt notification)	
For further informati MARINE PECLET	on concerning this matter, pleas		, 602 3067	
Name of Contact Person		act Area C	ode & Daytime Telephone Number	
Enclosed is a check t	or the following amount made			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
An Di P.G	ailing Address nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amer Divis The (2415	et Address Indiment Section Idon of Corporations Centre of Tallahassee IN, Monroe Street, Suite 810 Inassee, FL 32303	

Articles of Amendment to Articles of Incorporation of

ASSET ADVISORY CORP

(Name of Conversion as current	tly filed with the Florida Dept. of State)
P22000035292	tiv theu with the Profitor Dept. of State)
	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	* Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: ASSET ADVISORY CORP.	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co", "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
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 registered agent and/or the new registered office address Name of New Registered Agent	
tFlorida si	treet address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Signature of New .	Registered Agent, if changing
Check if applicable	

 \Box 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>	John Doe	
X Remove	\underline{V}	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	EDWARD HUROWITZ	16701 COLLINS AVENUE
XAdd			SUNNY ISLES BEACH FL 33160
Remove			
2) Change			NOT THE PARTY OF T
Add			
Remove 3) Change			SEE SEE
Add			
Remove			
4) Change		_	
Add			
Remove			
51 Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

sttach additional sheets, if necessary). (Be specific)	
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an amendment provides for an exchange, reclassification, or cancellation of issued share	<u>s.</u>
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
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	·

04 25/22	
The date of each amendment(s) adoption:	, if other th
date this document was signed. 04/25/22	
Effective date if applicable:	
(no more than 90	0 days after amendment file date)
Note: If the date inserted in this block does not meet the applie document's effective date on the Department of State's records.	table statutory filing requirements, this date will not be listed
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was were adopted by the incorporators, or baction was not required.	board of directors without shareholder action and shareholder
☐ The amendment(s) was were adopted by the shareholders. The by the shareholders was were sufficient for approval.	
☐ The amendment(s) was were approved by the shareholders thromust be separately provided for each voting group entitled to	ough voting groups. The following statements:
"The number of votes cast for the amendment(s) was we	es entire esset for appress of
by	
(voting group)	- Suincicul for approva
Dated 05/17/22	<u> </u>
Signature St.	yr – if directors or officers have not been
	e hands of a receiver, trustee, or other court
STEVEN HUROWITZ	
(Typed or printed	name of person signing)
PRESIDENT	
(Tule of nerson sig	ening)

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