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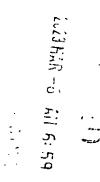
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MAY 1 = 2023

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION: A-PLUS RV & BO	DAT STORAGE INC.	
DOCUMENT NU	0.330000.1543.4		
The enclosed Artic	des of Amendment and fee are su	ubmitted for filing.	_
Please return all co	rrespondence concerning this ma	atter to the following:	
	LARRY C ROSECRANTS		
		Name of Contact Person	<u> </u>
	A-PLUS RV & BOAT STOR	RAGE INC	
		Firm/ Company	·
	848 MENTMORE CIRCLE		
		Address	
	DELTONA, FLORIDA 3273	38	
		City/ State and Zip Cod	e
	LROSECRANTS@GMAIL.	COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further inform: LARRY ROSECR	tion concerning this matter, plea	se call: at (927-7171
Name of Contact Person		Area Co	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	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
О Р	Lailing Address mendment Section Division of Corporations O. Box 6327 fallahassee, F1, 32314	Amend Divisio The Co 2415 Y	Address ment Section n of Corporations entre of Tallahassee M. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment Articles of Incorporation

	of	
A-PLUS RV & BOAT STORAGE INC.		2023 HAR -0 All 6:50
(Name of Corpo	oration as currently filed with the Flor	
222(0000)35624		" . " · " c
(D	ocument Number of Corporation (if know	wn)
Pursuant to the provisions of section 607.1006, Fl ts Articles of Incorporation:	orida Statutes, this Florida Profit Corpo	ration adopts the following amendment(s)
a. If amending name, enter the new name of t	he corporation:	
		The new
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," " "chartered," "professional association," or the a	Inc," or "Co". A professional corpo	
3. Enter new principal office address, if applic Principal office address <u>MUST BE A STREET</u>		
2. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE</u>	<u>E BOX</u>)	
D. If amending the registered agent and/or responses registered agent and/or the new registered.		the name of the
Name of New Registered Agent	****	
	(Florida street address)	
New Registered Office Address:		, Florida
The transfer of the College of the C		

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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:

\underline{X} Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VD	Steve Moran	441 Foggy Creek Road
X Add			Davenport, FL 33837
Remove			
2) Change	SD	Sharon Moran	441 Foggy Creek Road
X Add			Davenport, FL 33837
Remove 3) X Change	TD	Manuela F Rosecrants	848 Mentmore Circle
Add			Deltona, FL 32738
Remove			
4) X Change	PD	Larry C Rosecrants	848 Mentmore Circle
Add			Deltona, FL 32738
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)	e(s) here:		
				
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197- 5				
an amendment provides for an exc	hange, reclassifica	tion, or cancellatio	n of issued shares,	
rovisions for implementing the am	hange, reclassifica endment if not con	tion, or cancellation tained in the amer	n of issued shares, adment itself:	
an amendment provides for an exercisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassifica endment if not con	tion, or cancellatio tained in the amer	on of issued shares, adment itself:	
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an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassifica	tion, or cancellatic	on of issued shares, adment itself:	

date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement* must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval (voting group) MARCH 1, 2023 Dated_ Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) LARRY C ROSECRANTS

(Typed or printed name of person signing)

(Title of person signing)

PRESIDENT