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	Requestor's Name)				
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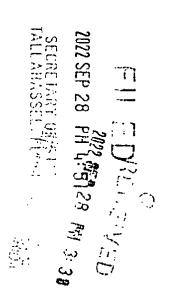
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COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company Jotth Monroe St E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (SC) 339-31/C

Area Code & Daytime Telephone Number 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 Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation

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The Social Wo	2022 SEP 28 PH 4:50
	v filed with the Florida Dept. of State) 1013 (Ul
P220000	1511 511. 531 1 1 1 1
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida 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," "c "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>)	2241 North Monroest Ste 1087 Tallahassee FL. 32303
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2241 North Monroe St Ste 1087 Tallahassec Fl. 32303
D. If amending the registered agent and/or registered office address: Name of New Registered Agent 224 Notal Agent a	ess in Florida, enter the name of the Lounge of Tallahassee Ll Monroe St ste 1087
New Registered Office Address: Tallahas	Ste . Florida 3230\ (City) (Zip Code)
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 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 Doc 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	PT	John Doe	
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			
Add			
Remove			
2) Change		_	
Add			
Remove 3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			
D			

Attach additional sheets, if necessary).	les, enter change(s) here: (Be specific)	
The state of the s	the Machine	
		
		
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f an amendment provides for an exch	nge reclassification or cancellation	of iccord charge
provisions for implementing the ame	dment if not contained in the amend	ment itself:
tifunt mosti while indicate MA	ament it not contained in the ament	in in its install
(1) not appacable, indicate (N/2C)		
(if not applicable, indicate N/A)		
(у погаррасите, такчие зум)		
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. . .

The date of each amendment(s) adoption:	09-7	28-2022	, if other than the
late this document was signed.	·		, it other than the
Effective date <u>if applicable</u> :	09-28 no more than 90 days a	- 2072 fier amendment file date,)
Note: If the date inserted in this block does not n document's effective date on the Department of Sta		tutory filing requirement	ts, this date will not be listed as the
Adoption of Amendment(s) (CHEC	EK ONE)		
The amendment(s) was/were adopted by the incoaction was not required.	orporators, or board of	directors without shareh	older action and shareholder
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for approximation.		r of votes cast for the am	endment(s)
☐ The amendment(s) was/were approved by the sh must be separately provided for each voting gro			
"The number of votes cast for the amendm	ient(s) was/were suffic	ient for approval	
by	group)	·••	
(voting	group)		
Dated 09-28-20	250		
Signature	4 _		
/(By a director, presiden	orator - if in the hands of	irectors or officers have of a receiver, trustee, or o	
	oed or printed name of	Noore	
_		person signing)	
<u>P</u>	resident		
(Titl	e of person signing)		