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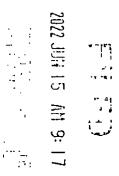
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: AHUMADA AT T	THE GROVE CORP			
DOCUMENT NUMB	P22000044072				
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
		ANA K DA SILVA			
-	Name of Contact Person				
	JDK NETWORK LLC				
-		_			
-	_				
City/ State and Zip Code					
	AK	DASILVA@JDKNETWO	RK.COM		
-	E-mail address: (to be us	sed for future annual report	notification)		
	concerning this matter, pleas	se call: 786	7757331		2022 JUH 15 MH 9:
	f Contact Person	at ()	er	<u>-</u>
	the following amount made		•		M 9
■ \$35 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)	(T)	17
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio The C	Address Innent Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

AHUMADA AT THE GROVE CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P22000044972

(Document Number of Corporation (if known)			
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the foits Articles of Incorporation:	llowing an	nendme	ent(s) t
A. If amending name, enter the new name of the corporation:			
	771	e new	,
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation, "or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must "chartered," "professional association," or the abbreviation "P.A."	eviation "	Corp., '	•
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)		2027	
			
	•••		1 (), 3 1 (), 3
	·-	Ü٦.	* ***
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:	• ;	訊	: ا≹ دخدمو
Name of New Registered Agent		ဏ္ဍ	ا رييا
Name of New Registered Agem		_	
(Florida street address)			
New Registered Office Address:, Florida	(Zip Code		
	, ,		
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 pos	ition.		
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.

Example: 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>	Address
1) Change	S	AHUMADA ALTAHONA, ADOLFO A	10893 NW 17TH ST UNIT 121
X Add			DORAL, FL 33172
Remove			
2) Change			
Add			
Remove 3.) Change			
Add			
Rensove			· · · · · · · · · · · · · · · · · · ·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			·
6) Change			
Add			
Remove			

-	(Be specific)	
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	ange, reclassification, or cancel	lation of issued shares.
f an amendment provides for an exch		mendment itself:
provisions for implementing the ame	ndment if not contained in the a	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the a	
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provisions for implementing the ame	ndment if not contained in the a	

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		06/08/2022		
The date of each amend date this document was si				, if other than the
Effective date <u>if applica</u>	06/08/2022 ole:			
		(no more than 90 d	lays after amendment file date)	
Note: If the date inserted ocument's effective date			le statutory filing requirements, this da	ate will not be listed as the
Adoption of Amendmen	t(s) (CHECK ONE)		
☐ The amendment(s) was action was not require	•	the incorporators, or boa	ard of directors without shareholder act	on and shareholder
The amendment(s) was by the shareholders w			umber of votes east for the amendment	(s)
			gh voting groups. The following statem te separately on the amendment(s):	ent
"The number of	votes cast for the a	mendment(s) was/were	sufficient for approval	
by				
	(voting group)		
,)6/08/2022			
Dated_				
Signatu	ic Adol	o Ahumada		
	(By a director, p selected, by an i	resident or other officer	 if directors or officers have not been ands of a receiver, trustee, or other cou 	
		AHUMADA DOMI	NGUEZ, ADOLFO A	
		(Typed or printed nar	me of person signing)	
		PRESIDENT		
		(Title of person signi	ng)	