P2200074079

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at 11/3/2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: My Bank, Inc.					
DOCUMENT NUM	BER: P22000074079	<u> </u>			
The enclosed Articles	s of Amendment and fee are su	ibmitted for filing.			
Please return all corre	espondence concerning this ma	atter to the following:			
	Richard Pearlman				
		Name of Contact Person	n		
	Igler and Pearlman, P.A.				
	Firm/ Company				
	2457 Care Drive, Suite 203				
	Address				
	Tallahassee, Florida 32308				
		City/ State and Zip Cod	e = = = = = = = = = = = = = = = = = = =		
	richard.pearlman@iglerlaw.c	rom			
		sed for future annual report	notification)		
For further information	on concerning this matter, plea	se call:			
Richard Pearlman	·	at (<u>850</u>	_) 878-2411		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or 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)		
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303		

Articles of Amendment to Articles of Incorporation of

My Bank, Inc.	200000000000000000000000000000000000000
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P22000074079	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must he distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	1415 SW 17th Street
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Ocala, Florida 34471
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	1415 SW 17th Street
	Ocala, Florida 34471
). If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office addres	<u>s:</u>
Name of New Registered Agent	
(Florida si	treet address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
Sample to the state of the stat	
New Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent. I am familiar	<u>t:</u> with and accept the obligations of the position
	and the same of the parties of the p
Signature of New I	Decisional Association
Signature of New I	Registered Agent, if changing
Check if applicable	
The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	(c), 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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	Carl Walls	1415 SW 17th Street
X Add			Ocala, Florida 34471
Remove			
2) Change	VP	Roger McKellar	1415 SW 17th Street
X Add			Ocala, Florida 34471
Remove 3) Change	ST	Mary Grant	1415 SW 17th Street
XAdd			Ocała, Florida 34471
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			-
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)							
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an amenum	r implementi	no the emen	nge, reclassino	ation, or cance	ellation of issued amendment its	snares,	
(if not an	olicable, indic	ente N/A)	ument ii not co	ontained in the	amenument its	<u>en:</u>	
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The date of each amendment(s) adoption: November 2, 2022 date this document was signed.	, if other than the
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 appl document's effective date on the Department of State's records.	icable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or action 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.	ne number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders the must be separately provided for each voting group entitled to	
"The number of votes cast for the amendment(s) was/w	ere sufficient for approval
by	
by(voting group)	
Dated	
Signature Car Will	,
(By a director, president or other off selected, by an incorporator – if in the appointed fiduciary by that fiduciary	cer – if directors or officers have not been ne hands of a receiver, trustee, or other court ')
Carl Walls	
(Typed or printed	name of person signing)
President	
(Title of person si	gning)