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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Uberrimo Homes C	Corp 	
DOCUMENT NUME	D22000000637		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	Camilo A Gomez Munoz		
		Name of Contact Persor	1
	Uberrimo Homes Corp		
		Firm/ Company	
	6895 SW 18 Terrace Road,		
•		Address	
	Ocala, FL, 34476		
,		City/ State and Zip Code	-
	uberrimohomes@outlook.cor	11	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas		V13 9600
	of Contact Person	at (at (	843-8600 de & Daytime Telephone Number
Name o	i Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Ce	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

USERRIMO HOMES CORP	the filed with the Floride Dant of Caste)
222000080637	tly filed with the Florida Dept. of State)
(Document Number	of Corporation (if known)
dursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	5 Floridu Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corporation:	
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.	A professional corporation name must contain the word
3. Enter new principal office address, if applicable:	SE 55
Principal office address MUST BE A STREET ADDRESS )	>C -
	S To the state of
Enter new mailing address, if applicable:	SSE SSE
(Mailing address MAY BE A POST OFFICE BOX)	To N
	č ≅5
	Pi -
If amending the registered agent and/or registered office address     new registered agent and/or the new registered office address     Name of New Registered Agent	
(Florida și	treet address)
New Registered Office Address:	, Florida
	(City) (Lip Code)
lew 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.
Signature of New I	Registered Agent, if changing
ingituale of her i	agone on rigorit, y changing

Check if applicable

<sup>☐</sup> 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.

$\underline{X}$ Change	<u>PT</u> <u>Joh</u>	John Doe		
X Remove	<u>V</u> <u>Mik</u>	te Jones		
X Add	<u>SV</u> <u>Sall</u>	y Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	D	Larry Gomez	6895 SW 18 Terrace Road.	
X Add			Ocala, FL, 34476	
Remove				
2) Change				
Add				
Remove 3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		<del>-</del>		
Add			<del></del>	
Remove				
6) Change				
Add				
Remove				

Attach <i>additiona</i>	I sheets, if necessary).	(Be specific)			
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c .				<b>.</b>	
nrovisions for i	t provides for an exc mplementing the ame	<u>nange, reclassificati</u>	on, or cancellation o	of issued shares,	
(if not applie	cable, indicate N/A)	.nament ii not conta	tined in the amendi	iem usen.	
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The date of each amendment	s) adoption:	. if other than the
date this document was signed.	May 8th, 2024	
Effective date <u>if applicable</u> :	•	
	(no more than 90 days	after amendment file date)
	nis block does not meet the applicable see Department of State's records.	tatutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of	of directors without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number sufficient for approval.	per of votes east for the amendment(s)
	approved by the shareholders through velocities through velocities for each voting group entitled to vote se	
"The number of votes	cast for the amendment(s) was/were suff	icient for approval
by		<u> </u>
	(voting group)	
	h, 2024	
Dated	DocuSigned by:	
Signature	6 Tour	
(By set	a directorepresidentar other officer – if ected, by an incorporator – if in the hand pointed fiduciary by that fiduciary)	directors or officers have not been s of a receiver, trustee, or other court
	Camilo A Gomez Munoz	
	(Typed or printed name of	of person signing)
	President	
	(Title of person signing)	