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COVER LETTER

TO: Amendment Section Division of Corporations,

Tallahassee, FL 32314

NAME OF CORPORATION: 3 Natives Atlantic Ave Inc.					
DOCUMENT NUMBER: 122000089171					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
John Paul Caneso Name of Contact Person					
Firm/ Company					
100 E. Linton Blyd Suite 501					
Delray Beach FL 33483 City/ State and Zip Code					
Caniso and caniso @ gmail. LOM E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
MIKE Carwso CPA at (561) 702-9319 Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

3 Natives Atla	as currently filed with the F	Colorida Dent. of State)	
P a a 000	171980		
(Đocumer	nt Number of Corporation (if k	(nown)	
Pursuant to the provisions of section 607,1006, Florida S its Articles of Incorporation:	tatutes, this Florida Profit Co	rporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the corp			
3 Natives Coral	Springs, Inc	<u> </u>	The new
name must be distinguishable and contain the word "corp "Inc.," or Co.," or the designation "Corp," "Inc," o "chartered," "professional association," or the abbrevio	oration," "company," or "inc or "Co". A professional co	corporated" or the abbr	eviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	<u></u>		
			<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			<u>.</u>
(maning duaress MAT BE AT OST OFFICE BOX)			Co
			
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		iter the name of the	
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	ered Agent:	e ablications of the nos	ition
Thereby decept the appointment as registered agent. The	ni jamilar van ana accept ar	conigunous of the pos	
Signatu Signatu	re of New Registered Agent, ij	Cchanging	

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 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>	<u>Addres</u> s
1) Change			
Add			<u> </u>
Remove			· -
2) Change			
Add			
Remove 3) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
4) Change			
Add			
Remove			<u>-</u>
5) Change			
Add			
Remove			
6) Change	. .		
Add			.
Remove			

amending or adding additional Articles, enter change(s) here: tach additional sheets, if necessary). (Be specific)	
	-
	<u> </u>
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197	-
an amendment provides for an exchange, reclassification, or cancellation of issu	ed shares,
	1.0
rovisions for implementing the amendment if not contained in the amendment i	tseit:
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The date of each amendment(s)	adoption:	, if other than the
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 document's effective date on the I	block does not meet the applicable statutory filing requ	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were action was not required.	lopted by the incorporators, or board of directors withou	at shareholder action and shareholder
The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast fo sufficient for approval.	or the amendment(s)
☐ The amendment(s) was/were a must be separately provided for	oproved by the shareholders through voting groups. The or each voting group entitled to vote separately on the at	e following statement mendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approva	ıl .
by		<i>"</i>
	-(voting group)	
ĺ	1 1	&
Dated	8/10/2023	60
Signature		
(By a selec	director, president or other officer – if directors or officeted, by an incorporator – if in the hands of a receiver, truinted fiduciary by that fiduciary)	
	Torra Paul Caruso (Typed or printed name of person signing)	
	(Title of person signing)	HE DOARD OF LIRECTORS
	(Time of person signing)	