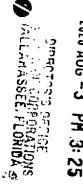
	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UF	WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer: J. HORNE	1
A(Filing Officer: J. HORNE 16 - 3 2023	

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,

COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: XX16'00	on SIS, INC
DOCUMENT NUMBER: P2300	00018024
The enclosed Articles of Amendment and fee are sub	omitted for filing.
Please return all correspondence concerning this mat	ter to the following:
- Fulto	Name of Contact Person NG OD: STS TAIC:
3001 4	Firm/ Company 1. Silver SPRINGS BLYD Address
<u>Oca</u>	Address City/ State and Zip Code
E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, pleas	se call:
Furn Wilson	at (352) 844-5619 Area Code & Daytime Telephone Number
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	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

	to Articles of Incorporation	n n	. ')
/	of	2023 2023	
(-16530)	らてラーナ	4025	Fr.
(Name of Cornor	ration as currently filed wi	th the Florida Dept. of State	5) :
7	23000018	IALL	# M.C.
(Do	cument Number of Corpora	<u> </u>	
•	•	,	
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	rida Statutes, this <i>Florida P</i>	rofit Corporation adopts the	following amendment(s) t
·			
A. If amending name, enter the new name of the	e corporation:		
		<u> </u>	The new
name must be distinguishable and contain the word			
"Inc.," or Co.," or the designation "Corp," "In "Inchartered," "professional association," or the ab		onal corporation name mus	i contain the word
, ,			
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A			<u> </u>
		** **	
		-	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)		
		-	

		·	···
D. If amending the registered agent and/or regi	istered office address in F!	orida, enter the name of the	!
new registered agent and/or the new register			,
Name of New Registered Agent			
	(Florida street addres	s)	
V 5 100 111		Utanida	
New Registered Office Address:	(City)	, Florida	(Zip Code)
New Registered Agent's Signature, if changing	Registered Agent:	count the obligations of the o	waltion
I hereby accept the appointment as registered ager	u i am jamuiar wun and i	іссері іне овиданоп'я ој іпе р	varion.
<u> </u>	ignature 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	PT John Doc	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	VD GRTHALENA S. MULBS	RRY 3001 W. Silver Spilmes Bu. OCALA, FC 34475
X Add		DCALA, FC 34475
Remove		·
2) Change		
Add		
Remove 3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

	cles, enter change(s) (Be specific)	_		
		•		_
· · · · <u> · · · · · · · · · · · · · ·</u>				
	· 		•	-
				
	-			
	 			
		, ,		
		 		
an amendment provides for an exch	ange, reclassification	n, or cancellation of	ant itealf:	
ravisians for implementing the amou	idiliciti ii not comai	ned in the amendin	em nsen.	
provisions for implementing the ame				
orovisions for implementing the ame (if not applicable, indicate N/A)				
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> : Au 6457 2023 (no more than 90 days after amendme	
(no more than 90 days after amendme	nt file date)
Note: If the date inserted in this block does not meet the applicable statutory filing r document's effective date on the Department of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors with action was not required.	out shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast by the shareholders was/were sufficient for approval.	for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. To must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for appro	val "
(voting group)	
Dated 8-62023	
Signature By a director, president or other officer – if directors or officer	
selected, by an incorporator – if in the hands of a receiver, appointed fiduciary by that fiduciary)	
TULTON L - T. W	son JN
(Typed or printed name of person signing	ਰ)
CHAIRMAN	
(Title of person signing)	