P23000053789

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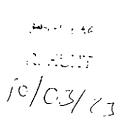
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COVER LETTER

TO: Amendment Section
Division of Corporations

PRINCETON DEVELOPERS INC NAME OF CORPORATION: P23000053789 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Matthew Beckford Name of Contact Person PRINCETON DEVELOPERS INC Firm/ Company 846 N Cocoa Blvd STE C Address Cocoa FL, 32922 City/ State and Zip Code matt@goshencf.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Matthew Beckford 321 2151145 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

DIVISION OF CORPORATION

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Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	v filed with the Florida Dept. of State)		
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the following	g amendn	nent(s) to
A. If amending name, enter the new name of the corporation:			
		_The ne	
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."			
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			-
			_
			- 말
C. Enter new mailing address, if applicable:		023	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		<u>_</u> 8_	- 호류
		1	의학교 - 공천은
		~°	19c
		PH 12: 1	- C.S.
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address		∵: <u>=</u>	gh g
•	<u>.</u>	0	r.
Name of New Registered Agent		-	
(Florida str	out addracs)	-	
	,		
New Registered Office Address:	(City) , Florida(Zip C	ode)	-
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar v	in the control of the position of the position.		
	,		
Signature of Nov. D	egistered Agent, if changing	-	
Algmatice to New R.	egistereu Agent, y enangmg		
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.

X Change	<u>PT</u> <u>J</u>	John Doe		
X Remove	<u>V</u> <u>N</u>	Mike Jones		
X Add	<u>sv</u> <u>s</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	VP	PETGRAVE, ANTHONY	846 N COCOA BLVD COCOA, FL 32922	<u>-</u>
Add X				
Remove				
2) Change				OISING
Add			2023 OCT	SICH (
Remove 3) Change			<u></u>	100 AS 10
Add			P# 12:	0 0 5 7 4 0 0 7 5 7 4 1
Remove				
4) Change				-
Add				-
Remove				
5) Change				-
Add				-
Remove				
6) Change				-
Add				-
Remove				

attach additional sheets, if necessary). (Be specific)		
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for amandment provides for an aychange reclassification or cancellation of issued shares		
f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:		
(if not applicable, indicate N/A)		
		_
		_
		_
		_
		_
		_

	09/26/2023	
	on:	, if other than the
late this document was signed. (99/26/202	23	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departi	does not meet the applicable statutory filing requirements, this date whent of State's records.	fill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without shareholder action ar	nd shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) ent for approval.	
• •	d by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	28
"The number of votes cast for the	he amendment(s) was/were sufficient for approval) Wision of C 2023 OCT -3
by	·``	981
	(voting group)	ယ် ရှင်း
09/26/2023		PH12: 40
Dated		2 EE
Signature White	a-o.	0.4.
(By a direct	pr. president or other officer – if directors or officers have not been	
	an incorporator - if in the hands of a receiver, trustee, or other court	

(Typed or printed name of person signing)

(Title of person signing)

appointed fiduciary by that fiduciary)

Matthew Beckford

President