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(Rea	uestor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	Certificates	s of Status
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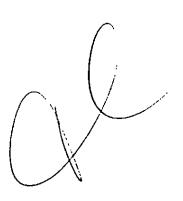
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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Address For further information concerning this matter, please call: Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & ☐\$52.50 Filing Fee **□\$**43.75 Filing Fee & 🔀 \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Amendment

Articles	of	Incorporation
		a f

LPI Consulting Inc	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P23000060485	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006 , Florida Statutes, this F its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	projessional corporation name musi contain me word
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	: 223
	300
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	0
	~
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	ress in Florida, enter the name of the
Name of New Registered Agent	
(Florida str	rees address)
N. B. Completing Harmer	, Florida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature if changing Registered Agent I hereby accept the appointment us registered agent. I am familiar s	ts with and accept the obligations of the position.
Signature of New R	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)

Example:

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>F1</u> .	10mi 150	<u> </u>					
X Remove	<u>v</u>	Mike Jo	ncs					
X Add	<u>sy</u>	Sally Sn	<u>nith</u>	•				
Type of Action (Check One)	<u>Title</u>		Name	D .1	Address	- 0	Oder	
i) Change	<u>P</u>	_	Lucian	Pugliaresi	<u>8810</u> Way	S. Jean	Laks Unit	
Add Remove	l de		Tarrica	O	Vero bec	2ch, Fz	3291	.3
2) _X_ Change Add	TO P) - >	Teresa 1	Gorman	Way,	Unit 4	KS 104	つ
Remove 3) Change	P 	_			Vero B	eah. R	<u> 3296</u>	9
Add Remove								
4) Change							2023 00	/-::* 1
Remove), 	27 0	
5) Change		_					PH 12:	, 55 1922
Remove 6) Change						. <u>-</u> .	<u>5</u>	
Add								
Remove								

ttach additional sheets, if necessary). (Be spec	change(s) here: ific)				
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			- <u> </u>	PH 12:	•
			73,10	- 58	
If an amendment provides for an exchange, re provisions for implementing the amendment (if not applicable, indicate N/A)	classification, or concella I not contained in the an	tion of issued shares, pendment Itself:			
				_	
				_	
				_	
				_	

The date of each amendment(s) a	doptlon:	, if other than
date this document was signed.	•	
Effective date if applicable:	In mediately (no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	clock does not meet the applicable statutory filing requirements, the expartment of State's records.	his date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amend ufficient for approval.	iment(s)
The amendment(s) was/were ap	proved by the shareholders through voting groups. The following streach voting group entitled to vote separately on the amendment(s	statement):
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
Dated Signature	9/27/2023 ma ana	
(By a select	director, president or other officer - if directors or officers have no ed, by an incorporator - if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	2023 OCT 1.0 PH 12: 5
	Teresu Gorman	CI
	(Typed or printed name of person signing)	10.0
	President	fo P
	(Title of person signing)	12: