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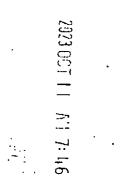
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:

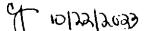




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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION:					
DOCUMENT NUM						
	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	Elizabeth Ponce					
		Name of Contact Person	1			
	Infinity Title Corp					
		Firm/ Company				
	1203 Skyline Blvd					
		Address				
	Cape Coral, FL 33991					
	c					
	elizabeth@infinitytitlecorp.co	om				
	-	sed for future annual report	notification)			
For further informati Elizabeth Ponce	on concerning this matter, pleas	se call:at (236-6736			
Name	e of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:			
s35 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			Address			
_	nendment Section	Amendment Section Division of Corporations				
	vision of Corporations O. Box 6327	The Centre of Tallahassee				
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Company to a company	1073 GOT 1 AM 7-16 ly filed with the Florida Dept. of State		
\ <u></u>	ly filed with the Florida Dept. of State)		
23000062642			
(Document Number of	of Corporation (if known)		
ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	Florida Profit Corporation adopts the following amendmen		
. If amending name, enter the new name of the corporation:			
	The new		
ame 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.	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word		
	8260 College Pkwy		
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	Fort Myers, FL 33919		
Finter new mailing address, if annlicable:	00/0 C 11 Di		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8260 College Pkwy		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8260 College Pkwy Fort Myers, FL 33919		
	Fort Myers, FL 33919 Iress in Florida, enter the name of the		
(Mailing address MAY BE A POST OFFICE BOX) 1. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	Fort Myers, FL 33919 Iress in Florida, enter the name of the		
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office add	Fort Myers, FL 33919 Iress in Florida, enter the name of the		
(Mailing address MAY BE A POST OFFICE BOX) 1. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address. Name of New Registered Agent	Fort Myers, FL 33919 Iress in Florida, enter the name of the		
(Mailing address MAY BE A POST OFFICE BOX) 1. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address Name of New Registered Agent	Fort Myers, FL 33919 Iress in Florida, enter the name of the s:		

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	Dana Angeline	10290 Carolina Willow Dr
X Add			Fort Myers, FL 33913
Remove			
2) X Change	D	Elizabeth Ponce	1203 Skyline Blvd
Add			Cape Coral, FL 33991
Remove 3) X Change	Т	Gabriela Erbella	1203 Skyline Blvd
Add			Cape Coral, FL 33991
Remove			
4) Change	<u>S</u>	Isabelle Kleintop	10290 Carolina Willow Dr
Add			Fort Myers, FL 33913
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Stock - The corporation will not ne authorizing any stocks.
2. The Corporation will be divided equally (50/50) between both Directors Elizabeth Ponce and Dana Angeline.
3. Directors: The following persons will be the Directors of the Corporation: Elizabeth Ponce 50% and Dana Angeline 50%.
4. Each Director will serve a term of 10 years.
5. Officers: The following persons will be elected to fill the respective offices: Gabriela Erbella as Treasurer
and Isabelle Kleintop as Secretary.
6. Instruments which relate to an interest in real estate must be signed by the following: Elizabeth Ponce as Director or
Dana Angeline as Director or a combined signature od the Treasurer and Secretary.
7. The Directors are authorized to do the following: Open a corporate bank account, Obtain a bank loan, lease office space
upon such terms as the Directors deem appropriate.
8. Employment agreements will be authorized with the following directors Elizabeth Ponce or Dana Angelin
9. Stock certificates: N/A
F. If 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) N/A

	10/09/2023	
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 block does document's effective date on the Department	s not meet the applicable statutory filing requirements, this date will of State's records.	not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by t action was not required.	he incorporators, or board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for the shareholders was/were sufficient for the shareholders.	he shareholders. The number of votes cast for the amendment(s) or approval.	
☐ The amendment(s) was/were approved by must be separately provided for each vota	the shareholders through voting groups. The following statement ing group entitled to vote separately on the amendment(s):	
"The number of votes cast for the ar	mendment(s) was/were sufficient for approval	
by <u>direc</u>	tors "	
	voting group)	
Dated		
	1. Page 10	
Signature	A service of the stars of the stars have not been	_
	resident or other officer - if directors or officers have not been noorporator - if in the hands of a receiver, trustee, or other court	
	ary by that fiduciary)	
	Elizabeth Ponce	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	