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| (Requestor's Name) | | |
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| PICK-UP WAIT MAIL | | |
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| (Business Entity Name) | | |
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| Certified Copies Certificates of Status | | |
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| Special Instructions to Filing Officer: | | |
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Office Use Only



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COVER LETTER

TO: Amendment Section

Division of Corporations

| OCUMENT NUMBER: P 23000064246 | | | | | |
|--|--|--|--|--|--|
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | | |
| lease return all correspondence concerning this matter to the following: | | | | | |
| Name of Contact Person Harris J Inc Firm/ Company 2895 Newmark dv Address Deltona FL 32738 City/ State and Zip Code Harris J Inca Gahar Com E-mail address: (to be used for future annual report notification) | | | | | |
| For further information concerning this matter, please call: | | | | | |
| Name of Contact Person at (607) 592-8922 Area Code & Daytime Telephone Number Inclosed is a check for the following amount made payable to the Florida Department of State: | | | | | |
| \$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed) | | | | | |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810 | | | | | |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

| (| tly filed with the Florida Dept. of State) |
|--|---|
| (Document Number | of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation: | s Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| WA | The new |
| name 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 | A professional corporation name must contain the word |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | A/A |
| | |
| C. Enter new mailing address, if applicable: | t _{in} |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | - MA |
| D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre | |
| Name of New Registered Agent | (A |
| | <i>///</i> |
| (Florida s | street address) l |
| New Registered Office Address: | (City) , Florida(City) |
| | (city) |
| | |
| 1/ | AA |
| New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian Signature of New York Property Signature of New York Property Signature New York Property Signat | |

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 | Doe | |
|-------------------------------|----------------------|--------------|------------------|
| X Remove | <u>V</u> <u>Mike</u> | Jones | |
| X Add | SV Sally | Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Address</u> |
| 1) X Change | MER | Terry Harris | 2895 Newmark du |
| Add | | | Deltona FL 32738 |
| Remove 2) Change | President | Terry Harris | 2895 veumant de |
| X Add | | | Deltona FL 32738 |
| Remove Change | | | |
| Add | _ | | |
| 4) Change | | | |
| Add | | | / |
| Remove | | | <u></u> |
| 5) Change | | | |
| Add | | | |
| 6) Change | | | |
| Add | / | | |
| Remove | | | |
| | | | |

| ыл авашопат | dding additional Articles, enter change(s) here: sheets, if necessary). (Be specific) |
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| amendment | provides for an exchange, reclassification, or cancellation of issued shares, uplementing the amendment if not contained in the amendment itself: |
| (if not applic | rable, indicate N/A) |
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| The date of each amendment(s) adoption: | 4-8-24 | , if other than the |
|--|---|--|
| date this document was signed. | | |
| Effective date <u>if applicable</u> : | - H | · · · · · · · · · · · · · · · · · · · |
| | (no more than 90 days after a | mendment file date) |
| Note: If the date inserted in this block does r document's effective date on the Department o | | y filing requirements, this date will not be listed as the |
| Adoption of Amendment(s) (CI | HECK ONE) | |
| The amendment(s) was/were adopted by the action was not required. | incorporators, or board of direc | etors without shareholder action and shareholder |
| ☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for | | rotes cast for the amendment(s) |
| ☐ The amendment(s) was/were approved by the must be separately provided for each voting | | |
| "The number of votes cast for the ame | endment(s) was/were sufficient t | or approval |
| by 100 Moure | ting group) | , " |
| (vo. | ting group) | |
| Dated 4-8-24 | | |
| Dated (8 2 (| | |
| Signature 70 | 16002 | |
| (By a director, pres | sident or other officer - if direct | ors or officers have not been |
| | orporator – if in the hands of a r | eceiver, trustee, or other court |
| appointed fiduciar | y by that fiduciary) | |
| | ., 11 6 | |
| <u>levi</u> | M Harvis (Typed or printed name of person | |
| | (Typed or printed name of person | on signing) |
| Pres | Sident (Title of person signing) | |
| | (Title of person signing) | |