## P23000086709

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(Business Ellery Harrie)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: IRUE BDC INC
DOCUMENT NUMBER: P23000086709
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
PATRICIA - POLLAR!  Name of Contact Person
ADVANG FINANCIAL SEKVICE Firm/ Company
3924 CORAL RIDGE DRIVE
CORAZ SPRINGS, FL 33065  City/ State and Zip Code
patricial 040 tax 25 mail. 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 (CSU) 255-3848  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  Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy 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

## Articles of Amendment

to

	Articles	of	Incorpo	ration
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	Articles of Inco	rporation	FII	, Fran
TRUE	of	INC	200.	ED PH 2:25
		filed with the Florida De	ept. of States - 7	Pu -
PZ	230000	86.709	SECRETAGE	' n 2: 25
		Corporation (if known)	TALLAHAS	OF STATE
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this F	lorida Profit Corporation	adopts the followi	ng amendment(s) t
A. If amending name, enter the new name of	the corporation:			
			•	
name must be distinguishable and contain the wor "Inc" or Co" or the designation "Corp." "chartered," "professional association," or the	"Inc," or "Co". A	mpany, " or "incorporate professional corporation	d" or the abbreviat name must conta	The new ion "Corp.," in the word
B. Enter new principal office address, if appli	cable:			
(Principal office address MUST BE A STREET				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	E BOX)			
D. If amending the registered agent and/or re		ess in Florida, enter the r	name of the	
new registered agent and/or the new regist	tered office address:			
Name of New Registered Agent			<del></del>	_
	(Florida stre	et address)		
New Registered Office Address:			, Florida	
	(1	City)	(Zip	Code)
No. 6 de la companya Circumstanti de la companya Circumsta	- D'			
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag	<u>g Registered Agent:</u> gent. I am familiar wi	ith and accept the obligati	ions of the position.	
	-	•		
	0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0			_
	Signature of New Reg	gistered Agent, if changin	g	

Check if applicable

<sup>☐</sup> The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

amending or adding additional Arti tach additional sheets, if necessary).	(Be specific)
- <del></del>	
<u> </u>	
<u> </u>	
f an amendment provides for an exch	lange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	<u> </u>
•	
	<u> </u>

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>PT</u>	John Do	<u>oe</u>				
X Remove	<u>V</u>	Mike Jo	ones .				
<u>X</u> Add · · ·	<u>sv</u>	Sally Sr	nith ·				
Type of Action (Check One)	<u>Title</u>		Name			Address	
1) Change	SEC	<b>_</b>	GEORGE	R.C	OPELAND)	2051NE 25ThAVE	5
Add Add Remove						POMPANO BEACH, FL	33062
2) Change		_			<del></del>		
Add							
Remove 3) Change	-	_					
Add							
Remove							
4) Change		_					
Add							
Remove							
5) Change		_					
Add							
Remove							
6) Change		_	-				
Add							
Remove							

The date of each amendment(s) add	ption:	, 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 blo document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, artment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendicient for approval.	lment(s)
must be separately provided for e	oved by the shareholders through voting groups. The following such voting group entitled to vote separately on the amendment(s)	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated 🗡	7/30/24	
Signature //	2/30/24 Culin Kinanchi	
(By a dire selected,	ector, president or other officer – if directors or officers have not by an incorporator – if in the hands of a receiver, trustee, or other d fiduciary by that fiduciary)	
_	AUSTIN SIZUM ANICH (Typed or printed name of person signing)	<u> </u>
_	(Title of person signing)	

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