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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LORA AND ASSOCIATES INC			
DOCUMENT NUMBER: <u>P2400001808</u>			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Henry LORA Name of Contact Person Lenry WRA / LORA AND ASSOCIATES INC Firm/Company 1210 E Osceola Parkway # 301			
Rissimmee, FL, 34744 City/State and Zip Code			
9 nfv@ ancconsultants-com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call: Henry OPA at (407) 717-2336 Name of Contact Person Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:			
S35 Filing Fee S43.75 Filing Fee S43.75 Filing Fee S552.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32314 Tallahassee, FL 32303 The Centre of Tallahassee Tallahassee, FL 32303			

Articles of Amendment to Articles of Incorporation of

LORA AND ASS	OCIATES INC
(Name of Corporation as currer	ntly filed with the Florida Dept. of State)
P24000	M1808
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is 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," "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:	1210 E Osceda Parkway
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	suite 301, Kissimmee, FL
	34744
C. Enter new mailing address, if applicable:	1210 E Osceola Parkway
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	1210 L OSEDIA PARKWAY
	Gote 301, Kissimule, FL
	34744
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address.	
Name of New Registered Agent	- <u>-</u>
(Florida :	street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent	nt:
I hereby accept the appointment as registered agent. I am familia.	r with and accept the obligations of the position.
Sionature of New	Registered Agent, if changing

Check if applicable

 \Box 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> <u>Joh</u>	<u> 1 Doc</u>	
X Remove	V Mik	<u>ç Jones</u>	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	NP	Waddy, Abrev F.	83 lealand Ave Agawam, Ha 01001
Remove 2) Change Add	NP	Stuart, Lora	37105 TOWN GREEN Dr ElmsFURD, NY 10523
Remove Change Add	P	Henry, Lora	DR # 1105 Hiam?
Remove 4)ChangeAdd			FL, 33132
Remove Change Add			
Remove 6)ChangeAdd			
Remove			

rovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		icles, enter change(s) her (Be specific)		
provisions for implementing the amendment if not contained in the amendment itself;				
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(if not applicable, indicate N/A)	an amendment provides for an exch	nange, reclassification, or	cancellation of issued sh	ares,
	(if not applicable, indicate V(1)	ndment if not contained	in the amendment itself:	
	(ij noi appacame, maicate NA)			
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The date of each amendment(s) ad date this document was signed.	option:	, if other than the
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	ock does not meet the applicable statutory filing requirements, this disartment of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board of directors without shareholder acti	on and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment ficient for approval.	(s)
☐ The amendment(s) was/were appromust be separately provided for e	oved by the shareholders through voting groups. The following statem such voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated OH 6	24/2024 Mytora	
(By a dir selected.	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other cou	rt
appointe	d fiduciary by that fiduciary)	
_	Henry Lora (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	-
_	President	
	(Title of person signing)	