## P24000022385

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



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FILED 2024 JULI 1 PH 2: 43

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## **COVER LETTER**

TO: Amendment Section

Division of Corpor	ations		
NAME OF CORPORA	ATION: AFFOID		Charter
DOCUMENT NUMBE	R: 72 40	0000 2238	<u>'</u> \$
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
-	AFFORDAL GULLEY Lango, FL	Name of Contact Person  Name of Contact Person  Firm/ Company  / OCC S. B  Address  3377    City/ State and Zip Code  sed for future annual report	. 1
For further information	concerning this matter, pleas	se call:	
Anthony	Stanganelli Contact Person	at ( <b>72 )</b> Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. F	ng Address dment Section on of Corporations Box 6327 nassee, FL 32314	Amenc Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## **Articles of Amendment**

to

ļ	Artic	es	οf	Inco	rnar	ation
•					· Pv	411011

Affordable instance Charter in a 200 FILET
(Name of Corporation as currently filed with the Florida Dept. of State)
D 1 4 00000 1 2 28 6 1/ P/12:
(Document Number of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) s Articles of Incorporation:
If amending name, enter the new name of the corporation:
1 / Ph
The new ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the word chartered," "professional association," or the abbreviation "P.A."  Enter new principal office address, if applicable:
Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent 114
Name of New Negislerea Agent
(Florida street address)  New Registered Office Address: 1000 S. Belcher Rd Suite A5, Florida 33771 (City) (Zip Code)
(City) Large
lew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.  Signature of New Registered Agent, if changing
Signature of New Registered Agent, if changing
theck 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.

X Change	<u>PT</u> <u>John</u>	<u>Doc</u>		
X Remove	<u>V</u> <u>Mike</u>	Jones		
X Add	SV Sally	<u>Smith</u>		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	$\sim$	Address
1) Change	MA (NS)	Luisa	Stang ancelli	1571 Ambrosia
_X Add	$\bigvee$		U	Or Clearwater FI
Remove	4			33764
2) Change	_Nt			
Add				
Remove 3) Change	_N/b			
Add	•			
Remove	/^			
4) Change	<u>(V /r</u>			
Add	•			
Remove	1 h			
5) Change	<u> </u>		<del></del>	
Add	•			
Remove	N   N			
6) Change	1/1/1			
Add				
Remove				

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n amendment provid	les for an exchange, reclass	sification, or cancella	tion of issued share	es,
(if not applicable, in	dicate N/A)	t contained in the am	tenament usen.	
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		19-1		

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The date of each amendment(s) adoption:	than
Effective date if applicable:  (no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste document's effective date on the Department of State's records.	d as
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.	,
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by,"	
Signature  (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)  (Typed or printed name of person signing)  (Title of person signing)	

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