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COVER LETTER

Division of Corporations DEWXE HOMES KEALTY The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: 2055 RUICES 5ales 6 ada proservices. Com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy

enclosed)

Mailing Address

TO: Amendment Section

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

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation

of

| Name of Corporation | SACTY C | th the Florida D | ont of State) | | _ |
|--|--------------------------------|---|--|----------------------------|------------|
| P24000022392 | as currently flied w | atii the Fioritia Di | ept. or state) | | |
| | it Number of Corpor | ation (if known) | | | |
| Pursuant to the provisions of section 607,1006, Florida Stits Articles of Incorporation: | tatutes, this <i>Florida</i> . | Profit Corporation | adopts the followi | ng amendn | ient(s) to |
| A. If amending name, enter the new name of the corp | oration: | | | | |
| | | | | The ne | |
| name must be distinguishable and contain the word "corp" "Inc.," or Co.," or the designation "Corp," "Inc," o "chartered," "professional association," or the abbrevia | or "Co". A profess | ," or "incorporated sional corporation | d" or the abbreviat name-must-conta | ion "Corp., iin the wor | ·· ·d |
| B. Enter new principal office address, if applicable: | | | | | ~> |
| (Principal office address <u>MUST BE A STREET ADDRI</u> | <u>ESS</u>) | | | | (|
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| | | | | | 다. |
| C. Enter new mailing address, if applicable: | | | | - | ; ×- |
| (Mailing address MAY BE A POST OFFICE BOX) | | | | • | <u> </u> |
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| | | | | | ‡_ |
| | | | | | |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered off | | lorida, enter the n | ame of the | | |
| Name of New Registered Agent | | | | | |
| 3-3-3- | | | | | |
| | (Florida street addre | ss) | | _ | |
| N. B. (100) 111 | | | GI | | |
| New Registered Office Address: | (City) | | , Florida /Zip | Code) | |
| | • | | · | | |
| | | | | | |
| New Registered Agent's Signature, if changing Registo | ered Agent: | | | | |
| Thereby accept the appointment as registered agent. Ta | m familiar with and | accept the obligati | ons of the position. | | |
| | | | | | |
| | | | | | |
| Signatus | re of New Registered | Agent, if changing | | _ | |
| Check if applicable | | | | | |
| ☐ The amendment(s) is/are being filed pursuant to s. 607 | 7.0120 (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)

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 Doc 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.

| <u>A</u> Change | <u>P1</u> | John De | <u>oe</u> | | |
|----------------------------|--------------|--------------|-----------------|-------------|--------------------|
| X Remove | <u>V</u> | Mike Je | <u>ones</u> | | |
| X Add | <u>sv</u> | Sally Si | <u>mith</u> | | |
| Type of Action (Check One) | <u>Title</u> | | Name | | Address |
| 1) Change | <u>yp</u> | _ | LOPEZ APONTE, V | i haei | 7412 BEAR CLAW RUD |
| Add | | | | | Oclando, FL 32825 |
| Remove | | | | | |
| 2) Change | | _ | | | |
| Add | | | | | |
| Remove Change | | _ | | | |
| Add | | | | | |
| Remove | | | | | |
| 4) Change | | | | | |
| Add | | | | | **** |
| Remove | | | | | |
| 5) Change | | _ | | | |
| Add | | | | | |
| Remove | | | | | |
| 6) Change | | _ | | | |
| Add | | | | | |
| Remove | | | | | |

| f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific) | |
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| Attach additional sneets, if necessary).— (the specific) | |
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| f an amendment provides for an exchange, reclassification, or cancellat | ion of issued shares. |
| provisions for implementing the amendment if not contained in the ame | endment itself: |
| (if not applicable, indicate N/A) | |
| (1) | |
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| The date of each amendment(s) adop | tion: | , if other than the |
|---|---|--|
| date this document was signed. | | |
| Effective date <u>if applicable</u> : | | |
| | (no more than 90 days after amendment | file date) |
| Note: If the date inserted in this bloc document's effective date on the Depar | c does not meet the applicable statutory filing requention of State's records. | uirements, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were adopte action was not required. | d by the incorporators, or board of directors withou | it shareholder action and shareholder |
| The amendment(s) was/were adopte by the shareholders was/were suffice | d by the shareholders. The number of votes east for ient for approval. | or the amendment(s) |
| | ed by the shareholders through voting groups. The hyoting group entitled to vote separately on the an | |
| "The number of votes cast for | the amendment(s) was/were sufficient for approva | I |
| bv | | |
| , | (voting group) | |
| Dated | 1/2024 | |
| Signature | ney Cana | |
| (By a direc | tor, fresident or other officer – if directors or office | |
| | y an incorporator – if in the hands of a receiver, tru fiduciary by that fiduciary) | istee, or other court |
| •• | 11-1011 00010 | |
| _ | (Typed or printed name of person signing) | |
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| _ | (Title of person signing) | · ———————————————————————————————————— |