P24000031585

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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: NAVICORE SER	VICES, INC			
DOCUMENT NUM	BER: P24000031585				
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	JENNIFER KELLY				
		Name of Contact Person	1		
	NAVICORE SERVICES. INC				
	Firm/ Company				
	-	Address			
		City/ State and Zip Cod	e		
	JENNIFER33600@GMAIL.	СОМ			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, plea	se call:			
JENNIFER KELLY		at (813	282-4548	σ ~	
Name	of Contact Person	Area Co	de & Daytime Telephone Numbe		2
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	2024 AUG 21 SECRETARY TALLAHAS	: 5
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy	TALLAHASSEE, FL	•

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

is enclosed)

Articles of Amendment to Articles of Incorporation of

NAVICORE SERVICES, INC

(Name of Corporation as	ourrently filed with the F	Jorida Dant of State		
P24000031585	carrently med with the r	iorida Dept. or State)		
	lumber of Corporation (if k	known)		
Pursuant to the provisions of section 607,1006, Florida Statuits Articles of Incorporation:	ntes, this <i>Florida Profit Co</i>	rporation adopts the fo	llowing amendme	nt(s) t
A. If amending name, enter the new name of the corpora	ation:			
name must be distinguishable and contain the word "corpora "Inc.," or Co.," or the designation "Corp," "Inc," or " "chartered," "professional association," or the abbreviatio	"Co". A professional co	corporated" or the abbr rporation name must o	The new eviation "Corp.," contain the word	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				
rememul office undress <u>stost be A Street Adifres.</u>	<u> </u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		nter the name of the		
Name of New Registered Agent			2024 AUG 21 PH SECRETARY OF TAILAH ASSE	•••••• 1
			6 2 1 -} -}	jes jes
New Registered Office Address:	Florida street address)	. Florida	PH Y OF ASSE	
New registered by/ree radio ess.	(City)	, 1 10/104	(Zip Códe) S:	&
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f		e obligations of the pos	ition.	
Signature o	of New Registered Agent, ij	f changing		
Check if applicable				

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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)

Remove

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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Р	WILLIAM SHEA	1211 N WESTSHORE BLVD 106
Add			TAMPA, FL 33607
X Remove			
2) Change	P	JEAN PAUL MENTADO	1211 N WESTSHORE BLVD
X Add			STE 106
Remove 3) Change			TAMPA, FL 33607
Add			
Remove			 ~
4) Change			SECR TA
Add			LA UG
Remove			
5) Change			
Add			FL F
Remove			
6) Change			
Add			

The date of each amendment(s) as date this document was signed.	Soption:	, it other than the
Uffective date <u>if applicable</u> :	one more than 90 days after anicodiment file dates	
Note: If the date inserted in this bidocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date wi partment of State's records.	Il not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
 The amendmentes) was were adeaction was not required. 	pted by the incorporators, or board of directors without shareholder action and	d shareholder
The amendment(s) was were add by the shareholders was were su	opted by the shareholders. The number of votes cast for the amendment(s) of the approval.	
The amendmentes) was were approvided for	proved by the shareholders through voting groups. The following statement 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	
ty	woting group)	
(Ty a/d	i	2024 AUG 21 PM 3: 4 SECRETARY OF STAT TALLAHASSEE, FL

and the separation of the properties of the prop