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P24000032607

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COVER LETTER

TO: Amendment Section Division of Corporations

•,

NAME OF CORPOR	ATION: DUIT ICENHOUS	R TAX & ACCOUNTING	PA 			
DOCUMENT NUMB	P24000032607					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	CHRISTINA L. DUIT					
	Name of Contact Person					
	DUIT ICENHOUR TAX & ACCOUNTING PA					
	Firm/ Company					
	PO BOX 335					
		Address				
	WAXHAW, NC 28173					
	City/ State and Zip Code					
	INFO@DUITICENHOUR.C	COM				
		sed for future annual report	notification)			
		,,				
For further information	concerning this matter, pleas	se call:				
CHRISTINA L. DUIT		at (de & Daytime Telephone Number			
Name o	f Contact Person	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	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status 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 Incorporation of

(Name of Corporation as current	ly filed with the Florida Dept. o	f State)
224000032607		
(Document Number of	of Corporation (if known)	 -
ursuant to the provisions of section 607.1006. Florida Statutes, this s Articles of Incorporation:	Florida Profit Corporation adop	ts the following amendment(s
. If amending name, enter the new name of the corporation:		
7/A		The new
ame 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 nam	the abbreviation "Corp ,"
	N/A	
. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRESS</u>)		
		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 335	<u> </u>
· · · · · · · · · · · · · · · · · · ·	WAXHAW, NC 28173	Š
. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		of the
Name of New Registered Agent N/A		
(Florida st	reet address)	
New Registered Office Address:	į;	lorida

Check 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)

Example:

Please note the officer/director title by the first letter of the office title:

 $P \sim President; \ V = Vice President; \ T = Treasurer; \ S = Secretary; \ D + Director; \ TR = Trustee; \ C = Chairman or Clerk; CEO - Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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	PT	<u>John Do</u>	<u>e</u>	
X Remove	<u>V</u>	Mike Joi	ne <u>s</u>	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) X Change	S		CHRISTINA L DUIT	1220 BROUGH HALL DRIVE
Add		_		WAXHAW, NC 28173
Remove X Change	יו		MICHELLE L ICENHOUR	8216 JAYME DRIVE UNIT 113
Add		_	-	WINTER GARDEN, FL 34787
Remove 3) Change		_		
Add Remove				
4) Change				
Add Remove				
5) Change		 -		
Add				
Remove 6) Change		_		
Add				
Remove				

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
ŇA

and the second s
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
N/A

•. • •.

The date of each amendment(s	\ adoption:	9/22	112024	, if other than the
date this document was signed.	ј ацориоа	11	-	If Other than the
	SAP			
Effective date <u>if applicable</u> :	- (no	more than 90	days after amendn	nent file date)
Note: If the date inserted in this document's effective date on the			able statutory filing	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHEC</u>	K ONE)		
■ The amendment(s) was/were a action was not required.	adopted by the inco	rporators, or be	oard of directors w	thout shareholder action and shareholder
☐ The amendment(s) was/were aby the shareholders was/were			number of votes co	ist for the amendment(s)
☐ The amendment(s) was/were a must be separately provided.	approved by the sha for each voting grou	areholders thro up entitled to v	ugh voting groups. ote separately on t	The following statement he amendment(s):
"The number of votes ca	ast for the amendme	ent(s) was/wer	e sufficient for app	roval
by				
,	(voting §	угоир)	•	
9/24/200	24			
Dated Signature	Christ	tina f	Dui	t
(By a selec		rator – if in the		officers have not been r, trustee, or other court
	CHRISTINA L	. DUIT		
	(Тур	ed or printed n	ame of person sign	ing)
	SECRETARY			
	(Title	e of person sign	ning)	