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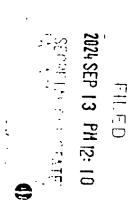
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: FASTLANE 208 I	NVESTMENTS, INC.				
DOCUMENT NUM	P24000051740					
The enclosed Article	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	SIRISHA GADIPARTI					
		Name of Contact Person				
		Firm/ Company				
	838 N RIDGEWOOD AVE					
		Address				
	DAYTONA BEACH, FL 32	<u>.</u> .				
		City/ State and Zip Code				
	STACY.SBTS@CFL.RR.CC)M				
	E-mail address: (to be us	ed for future annual report	notification)			
For further informati	on concerning this matter, pleas	se call:				
STACY CLARK		at (672-6999			
Name of Contact Person		Area Code & Daytime Telephone Number				
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:			
\$35 Filing Fee	S43.75 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Amendment to **Articles of Incorporation** of

(Name of Corporation as curren	tly filed with the Florida Dept. of State)	
P240000051740		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new name of the corporation:		
FASTLANE 982 INVESTMENTS, INC	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:	982 ORANGE AVE	
(Principal office address MUST BE A STREET ADDRESS)	DAYTONA BEACH, FL 32114	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	838 N RIDGEWOOD AVE	
(Matting datess MATTINE ATOST OFFICE BOX)	DAYTONA BEACH, FL 32114	
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	2 :	
	24 S	
(Florida s	treet address)	
New Registered Office Address:	, Florida	
	(City) (Zip Cade) 11	
	. 2	
New Registered Agent's Signature, if changing Registered Agen	™ NIA a a a a a a a a a a a a a a a a a a a	
Thereby accept the appointment as registered agent. I am familian	with and accept the oraginons of the position.	
Signature of New	Registered Agent, if changing	

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)

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>PT</u>	John Do	<u>e</u>	
<u>v</u>	Mike Joi	nes	
<u>sv</u>			
<u>Title</u>		Name	Address
	_		
	_		
	_	·	
-	_		-
	_		
	<u>V</u> <u>SV</u>	V Mike Jo SV Sally Sn	V Mike Jones SV Sally Smith

	or adding additional Art onal sheets, if necessary).	(Be specific)	· NIA-	
				
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provisions fo	ment provides for an excorrimplementing the among the am	hange, reclassification, or endment if not contained	r cancellation of issued shares, in the amendment itself:	NA
		<u>.</u>		

09/06/2024
The date of each amendment(s) adoption:, if other than the date this document was signed.
09/06/2024 Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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
by
09/06/2024 Dated
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)
SIRISHA GADIPARTI
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)