## P93000037228

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**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: HUEBAR, INC.		
DOCUMENT NUM			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	John Coniglio		
	-	Name of Contact Person	1
		Firm/ Company	
	PO Box 1702		
	D   (1)   E/ 14001	Address	
	Palm City, FL 34991	City/ State and Zip Code	<u>.                                    </u>
JOHN@JAMIEUNDERGROUND.COM			
	•	sed for future annual report	notification)
For further informatio	n concerning this matter, plea	se call:	
John Coniglio		at ( 772	486-2826
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	or 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

HUEBAR, INC			12: 1. 7
	of Corporation as currentl	iy thed with the Florida Dept. of State)	
P93000037228			STATE
	(Document Number o	f Corporation (if known)	, p 1 L
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendme	nt(s) to
A. If amending name, enter the new na	ame of the corporation:		
"Inc.," or Co.," or the designation "C	Corp," "Inc," or "Co". 2	A professional corporation name must contain the word	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2660 SE Fairmont Street	
		Stuart, FL 34997	
	(Document Number of Corporation (if known)  ALL ALLESSEE, FL  and to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to tricles of Incorporation:  Tamending name, enter the new name of the corporation:  The new must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "no Co.," or the designation "Corp.," "no Co.," or the designation "Corp.," "no Co.," or the designation "Corp.," "no Co.," or the abbreviation "P.A."  Inter new principal office address, if applicable: cipal office address MUST BE A STREET ADDRESS)  Stuart. FL 34997  Enter new mailing address MUST BE A STREET ADDRESS  Mailing address MAY BE A POST OFFICE BOX)  Falm City. FL 34991  Famending the registered agent and/or registered office address:  Name of New Registered Agent  John Coniglio  2660 SE Fairmont Street  (Florida street address)  New Registered Agent and/or the new registered office address:  New Registered Agent and More and the province of the position.  Registered Agent's Signature, if changing Registered Agent.  Signature of New Registered Agent, if changing  Signature of New Registered Agent, if changing		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		PO BOX 1702	
		Palm City, FL 34991	
new registered agent and/or the new		<u>:</u>	
Name of New Registered Agent	John Coniglio		
	2660 SE Fairmont Street		
	(Florida str	eet address)	
New Registered Office Address:	Stuart	, Florida_34997	
		(City) (Zip Code)	
Now Degistered Agent's Signature if a	hunging Degistered Agent	/	
/	12/1/11	$\sim$ $\sim$	
- <del></del>	Signature of New R	egistered Agent. if changing	
		-a	
Check if applicable  ☐ The amendment(s) is/are being filed p	ursuant 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.

Example: <u>X</u> Change	<u>PT</u> <u>Joh</u>	John Doe		
X Remove	. <u>V</u> <u>Mil</u>	Mike Jones		
X Add	<u>SV</u> <u>Sal</u>	ly Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
) Change	DP	Barry J. Rufo	3322 SE Inlet Harbor Trail	
Add			Stuart, FL 34996	
X Remove			<del> </del>	
2) Change	DS	Linda L. Rufo	3322 SE Inlet Harbor Trail	
Add			Stuart, FL 34996	
X Remove Change	PSD	John Coniglio	128 SW Klee Circle	
X Add			Port St. Lucie, FL 34953	
Remove				
4) Change	VPTD	Jacqueline Coniglio	128 SW Klee Circle	
X Add			Port St. Lucie, FL 34953	
Remove			<del>-</del>	
5) Change				
Add				
Remove				
n Change				
Add				
Remove				

f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)
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an amandment provider for an eve	shanga realiscification or cancellation of iccurd charge
an amenument provides for an exce	hange, reclassification, or cancellation of issued shares.  endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	the milet is not contained in the uncontinger ison.
(9)	
	<del></del> _
	<u> </u>

	October 1, 2022	
The date of each amendment(s) addate this document was signed.	option:	, if other than th
Effective date if applicable:		
<u> </u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this dartment of State's records.	ate will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adoption was not required.	ted by the incorporators, or board of directors without shareholder act	ion and shareholder
■ The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of votes cast for the amendment ficient for approval.	(s)
must be separately provided for e	oved by the shareholders through voting groups. The following staten ach voting group entitled to vote separately on the amendment(s):	rent
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selected. appointe	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other could fiduciary by that fiduciary)	
-	(Typed or printed name of person signing)	<del></del>
,	President/Secretary	

(Title of person signing)