P93 0000 79053

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COVER LETTER

TO: Amendment Sec Division of Corp					
NAME OF CORPO	RATION: 8510 Corp				
	BER: P93000079053				
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Eugene W Kligmann				
		Name of Contact Person	1		
	8510 NW 56 St	Firm/ Company			
		Address			
	Doral, Florida, 33166	1.00.000			
		City/ State and Zip Code			
	gene@ciifl.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
Eugene W Kligmann		at (297-9055		
Name of Contact Person			le & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	iling Address		<u>Address</u>		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

FILED

9510 Com

2021 JAN 21 PM 6: 20

as to corp.		2021 01	MET IN O E
(Name	of Corporation as currently	filed with the Florida Dept.of	EState) OF CTATE
(Name of Corporation as currently filed with the Florida Dept. of State) OF STATE P93000079053 TALLAHASSEE, FL			
	(Document Number of	Corporation (if known)	_
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this a	Florida Profit Corporation adopt	ts the following amendment(s) t
A. If amending name, enter the new n	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "i "chartered," "professional association,	Corp," "Inc." or "Co". A		
B. Enter new principal office address,	if applicable:		
(Principal office address <u>MUST BE A</u> S			120 17
			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			
(maining data ess MAT DI AT OST	OTTICE BOX		
			<u>. </u>
D. If amending the registered agent a			of the
new registered agent and/or the ne	w registered office address:	<u>.</u>	
Name of New Registered Agent	Eugene W Kligmann		
	8510 NW 56 St		
	(Florida stre	vet address)	
New Registered Office Address:	Doral, FL, 33166	ריז	
New Registered Office Address.			orida(Zip Code)
		•	
New Registered Agent's Signature, if o	hanging Registered Agents		
I hereby accept the appointment as regis			the position.
		•	•
	Con III Kla	4	
	Signature of New Re	egistered Agent, if changing	
Charle if applicable	V U		
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 = 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	<u>PT</u> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>e Jones</u>	
X Add	SV Sally	<u> / Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	D	John H Stewart	
Add X Remove			
2) Change Add	D, P, T	John H Stewart, Jr.	8510 NW 56 St. Doral, FL, 33166
Remove 3) Change X Add	D, VP. S	Bonnie Stewart Harper	8510 NW 56 St, Doral, FL, 33166
Remove 4) Change X	AAST S	Eugene W Kligmann	8510 NW 56 St, Doral, FL, 33166
Remove 5) Change Add			
Remove 6) Change Add			
Remove			_

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 NIA)	Attach additional sheets,	if necessary).	Be specific)				
provisions for implementing the amendment if not contained in the amendment itself:							
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(if not applicable, indicate N/A)	<u>provisions for impleme</u>	nting the amend	ment if not cont	ained in the ame	endment itself:		
	(if not applicable, in	idicate N/A)					
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	adoption:	, 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 locument's effective date on the	s block does not meet the applicable statutory filing requirement. Department of State's records.	s, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without shareho	older action and shareholder
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes east for the ame sufficient for approval.	endment(s)
	approved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendmen	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated //	director, president of other officer - if directors or officers have n	
selec	director, president of other officer – if directors or officers have need, by an incorporator – if in the hands of a receiver, trustee, or o inted fiduciary by that fiduciary)	not been ther court
	Eugene W Kligmann	
	(Typed or printed name of person signing)	
	Trustee	
	(Title of person signing)	