P94000038014

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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: 4403 Tradewinds, Inc. DOCUMENT NUMBER: P94000038014 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kimberly Abajian Name of Contact Person 4403 Tradewinds Inc. Firm/ Company 4403 West Tradewinds Inc. Address Lauderdale-by-the-Sea, FL 33308 City/ State and Zip Code Kimberly@joannhoffman.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954) 351-9111

Area Code & Daytime Telephone Number Kimberly Abajian Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

FILED

4403 Tradewinds Inc.				tam bod
(Name	of Corporation as currently filed wit	th the Florida Dep	10223111124	AM O ==
P94000038014		(AM 9: 55
	(Document Number of Corporat	ion (if known)	MILLA	OF STATE SEF, ET
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, this Florida Pr	rofit Corporation ac	lopts the followi	ing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
				The new
name must be distinguishable and contai. "Inc.," or Co.," or the designation "("chartered," "professional association,	Corp." "Inc." or "Co". → professio	or "incorporated" mal corporation n	or the abbreviat ame must conto	day ac
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable:			
C. Enter new mailing address, if appl	icable:			
(Mailing address MAY BE A POST	OFFICE BOX)			
	 -			<u> </u>
D. If amending the registered agent ar	nd/or registered office address in Flo	rida, enter the nan	ie of the	
new registered agent and/or the ne	w registered office address:			
Name of New Registered Agent	Christie H. Gibbons			
	4403 West Tradewinds Ave. Laudere	dale-by-the-Sea, FL	33308	_
	(Florida street address)			-
New Registered Office Address:			Florida	
	(City)			Code)
			·	·
New Registered Agent's Signature, if c	hanging Registered Agent: tered agent. I am familiar with and ac	cent the abligations	of the novition	
	11.4		oj ine position.	
Ch	Signature of New Registered A			
	Signature of New Registered A	gent, 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 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>b1.</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VSD	Christie H. Gibbons	4403 West Tradewinds Ave
X Add			Lauderdale by the Sea, FL 33308
Remove			
2) Change			
Add			
Remove 3) Change	_		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, i	f necessary).	les, enter change(s) here: (Be specific)		
<u> </u>				
			-	
		· · · · · · · · · · · · · · · · · · ·		_
				_
	_			-
	<u> </u>			
				
an amendment provide	s for an excha	nge, reclassification, or cancel	lation of issued shares,	
(if not applicable, ind	ong the amendicate N/A)	lment if not contained in the	mendment itself:	
NA				
<u> </u>				
				<u> </u>
			<u></u>	

•

) 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 thi document's effective date on the	is block does not meet the applicable statutory filing requirements, the Department of State's records.	ais date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholde	r action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amenda	nent(s)
	approved by the shareholders through voting groups. The following st for each voting group entitled to vote separately on the amendment(s).	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by		
-	(voting group)	
DatedSignature	DA -23	
sele	a director, president or other officer – if directors or officers have not leted, by an incorporator – if in the hands of a receiver, trustee, or other ointed fiduciary by that fiduciary)	peen r court
	Jo Ann Hoffman	
	(Typed or printed name of person signing)	
	President/Director	
	(Title of person signing)	