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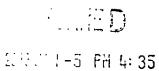
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Lehigh Showcase	Properties, Inc.				
DOCUMENT NUN	1BER:					
The enclosed Article	es of Amendment and fee are su	hmitted for filing.				
Please return all corr	respondence concerning this ma	tter to the following:				
	John M Morgan					
		Name of Contact Persor	1			
		Firm/ Company				
	9001 Daniels Parkway Suite 201					
		Address				
	Fort Myers, Florida 33912					
		City/ State and Zip Code				
	jmmorgan@morgantitle.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informat	ion concerning this matter, pleas	se call:				
John M Morgan		at (²³⁹) 454-0572 de & Daytime Telephone Number			
Name of 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	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Ai Di P.	ailing Address mendment Section vision of Corporations O. Box 6327 allahassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



Lehigh Showcase Properties, Inc.

(Name)	of Corporation as currently	filed with the Florid	la Dept. of State)	STATE
				13.FL
	(Document Number of	Corporation (if knows	n)	
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corpora	ttion adopts the follo	wing amendment(s
. If amending name, enter the new n	ame of the corporation:			
ame must be distinguishable and contain Inc.," or Co.," or the designation "C chartered," "professional association,"	lorp," "Inc," or "Co". A			
. Enter new principal office address, Principal office address <u>MUST BE A S</u>	<u>if applicable:</u> TREET ADDRESS)			<u>_</u>
. Enter new mailing address, if appl (Mailing address MAY BE A POST	icable <u>:</u> OFFICE BOX)			
. If amending the registered agent ar new registered agent and/or the new		ess in Florida, enter t	the name of the	
Name of New Registered Agent	John M. Morgan	. <u></u>		
	9001 Daniels Pkwy, Ste 20	ı,		
	(Florida stre	et adáress)		
New Registered Office Address:	Fort Myers		, Florida_3391	12
	1	Citys	()	Zip Code)
ew Registered Agent's Signature, if chereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar w	ith and accept the obli	igations of the positi	on.
	Signature of New R.	gistered Agent, if char	noina	
	Signature of New Re	қыстей ақст, 1 <i>ј спа</i> ғ	ng mg	

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.

\underline{X} Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u>V</u>	Hildegard A. Goertz	25 Homestead Rd, Ste 11
XAdd			Lehigh Acres, FL 33936
Remove			25 Homestead Rd, Ste 11
2) Change	<u>v</u>	Dominik Goertz	Lehigh Acres, FL 33936
X Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

Attach addition	adding additional Art al sheets, if necessary).	(Be specific)				
						
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f an amendme	nt provides for an exc	hange, reclassific	ation, or cancella	ation of issued sh	ares.	
provisions for	implementing the am	endment if not co	ntained in the ar	nendment itself:		
(if not app	licable, indicate NA)			***		
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The date of each amendment(s) adolate this document was signed.	otion:			_, if other than	the
Effective date <u>if applicable</u> :					
	(no more than 90) days after	r amendment file date)			
Note: If the date inserted in this blocdocument's effective date on the Depa	ck does not meet the applicable statut rtment of State's records.	ory filing requirements, this	date will r	not be listed a	s the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)				
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of di	rectors without shareholder a	action and s	hareholder	
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number o cient for approval.	f votes east for the amendme	ent(s)		
☐ The amendment(s) was/were appromust be separately provided for ea	wed by the shareholders through voting ch voting group entitled to vote separa	g groups. The following statety on the amendment(s):	ement	150 150 150 150	
"The number of votes east fo	r the amendment(s) was/were sufficient	nt for approval	, ·	1 1	
by		···	•	<u> </u>	
	(voting group)			را المناع المناطقة المناطقة	
			9 19 1 3 40		
Dated			. <u>.</u>	်း သ	
Dated	MACIL		i H	တ	
Signature/	// //			_	
(By a dire	etor, president or other officer - if dire				
	by an incorporator \(\frac{1}{2} \) if in the hands of fiduciary by that fiduciary)	a receiver, trustee, or other of	court		
••					
	ildegard A. Goertz				
	(Typed or printed name of pe	erson signing)			
S	ecretary				
-	(Title of person signing)				