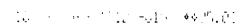
P96000060803

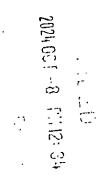
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(Address)			
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Central Florida Ac	quisitions, Inc.	
DOCUMENT NUM	P96000060803		
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:	
	Christina Taylor		
		Name of Contact Persor	1
	Central Florida Acquisitions,	Inc.	
		Firm/ Company	·
	20 3d Street SW, Suite 209		
		Address	
	Winter Haven, FL 33880		
		City/ State and Zip Code	
	efalandlord@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
Christina Taylor		407 at (
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:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810
ta	llahassee, FL 32314	24131	v. Promoc Street, Suite 610

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Central Florida Acquisitions, Inc.

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

2024 007 -8 PR142: 34

(Name o	of Corporation as currentl	y filed with the Florida Dept. of State)	
P96000060803		-	<i>.</i>
	(Document Number of	f Corporation (if known)	•
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following	ng amendment(s)
A. If amending name, enter the new na	ame of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A	company," or "incorporated" or the abbreviati professional corporation name must conta	on "Corp"
B. Enter new principal office address, if applicable:		N/A	
Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		20 3d Street SW, Suite 209	
		Winter Haven, FL 33880	
If amending the registered agent an new registered agent and/or the new			
-	N/A	<u>.</u>	
Name of New Registered Agent			_
	art it .	- 11	_
	N/A	vet address)	
New Registered Office Address:	(City), Florida		Code)
		(ειγ) (εφ	Codes
lew Registered Agent's Signature, if c hereby accept the appointment as regist		<u>:</u> with and accept the obligations of the position.	
	Signature of New R	egistered Agent, if changing	_
Theck if annlicable			

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>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	V,S,T	Dorothea T Bogert	PO Box 1896
Add			Auburndale, FL 33823
X Remove			3 181 2
2) Change	V,S,T	Christina Taylor	20 3d Street SW, Suite 209
X Add			Winter Haven, FL 33880
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	, if necessary). (E	le specific)			
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If an amendment provi	des for an exchang	ze, reclassificatio	n, or cancellation o	of issued shares,	
provisions for impleme	enting the amenda	nent if not contai	ined in the amendr	nent itself:	
(if not annlicable i	ndicate N/A)				
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The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department.	ck does not meet the applicable statutory filing requirements, this rtment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without shareholder a	action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of votes cast for the amendme cient for approval.	ent(s)
	ved by the shareholders through voting groups. The following stat ch voting group entitled to vote separately on the amendment(s):	ement
"The number of votes east fo	r the amendment(s) was/were sufficient for approval	
by		
•	(voting group)	
Dated	12/	
xelected	ctor president or other officer – if directors or officers have not be by an incorporator – if in the hands of a receiver, trustee, or other of fiduciary by that fiduciary)	
J.	W. Taylor	
	(Typed or printed name of person signing)	
P	resident	
_	(Title of person signing)	