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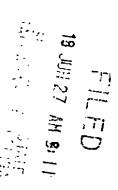


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And

R. WHITE JUN 2 9 2018



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION:BEACH-KERNA	N CORNER CORPORATI	ON	
DOCUMENT NUMI				
The enclosed Articles	of Amendment and fee are st	ibmitted for filing.		
Please return all corres	spondence concerning this ma	utter to the following:		
	Barbara Humphrey			
		Name of Contact Perso.	n	
	Law Office of Robert A. Hee	ekin		
		Firm/ Company		
	1 Sleiman Parkway, Suite 28	, -		
		Address		
	Jacksonville			
		City/ State and Zip Cod	<u> </u>	
		V		
tjohn:	son@sleiman.com			
	E-mail address; (to be u	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
	•			
Barbara Humphrey		904 at (de & Daytime Telephone Number	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo.	r the following amount made	payable to the Florida Depa	artment of State:	
\$35 Fiting 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)	
	ling Address		Address	
	endment Section	Amendment Section		
	sion of Corporations Box 6327	Division of Corporations Clifton Building		
	ahassee, FL 32314		Executive Center Circle	

Tallahassee, FL 32301

FILED

Articles of Amendment to 18 JU Articles of Incorporation

of

18 JUN 27 AH 9: || SECTION OF TAKE

BEACH-KERNAN CORNER CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State) P96000073451 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST_BE A_STREET_ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Rockford Staten Name of New Registered Agent 1 Sleiman Parkway, Suite 270 (Florida street address) Jacksonville New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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: \underline{X} Change	PΤ	John Doe			
X Remove	<u>V</u>	Mike Jones			
_X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	<u>COO</u>	Robert K. White	1 Sleiman Parkway, Suite 270		
Add X Remove			Jacksonville, Florida 32216		
2) Change	V	Michael W. Herzberg	1 Sleiman Parkway, Suite 270		
X Add			Jacksonville, Florida 32216		
Remove					
3) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

r <u>II amen</u> (Attach <i>a</i>	ding or adding additioudditional sheets, if nece	nat Arucies, enter ch ssary) (Be specific	ange(s) here; }		
N/A					
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f. <u>If an an</u>	iendment provides for	an exchange, reclass	ification, or cancel	lation of issued sha	ares,
	ons for implementing t not applicable, indicate		contained in the a	mendment itself:	
N/A					
					<u> </u>
					<u></u>
			· · · · · · · · · · · · · · · · · · ·		
<u>-</u>					

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.	,	
N/ Effective date if <u>applica</u> ble:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	
action was not required.	opied by the incorporators without shareholder action and shareholder	
DatedJune25	2018	
Signature		
(By a c	liredtor-president or other officer — if directors or officers have not been ed, by an incorporator — if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	ELIT, SLEIMAN, JR.	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	