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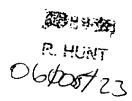
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## COVER LETTER

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**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	TION: LANE AVE	nue chim Dex	elopment contre
DOCUMENT NUMBE	R: <u>7960000</u>	80091	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
_	Heney LON	Name of Contact Persor	1
_	LANE AVENI	Einn/Company	Doment center
_	1650 LANE	2 AVENUE SOUT Address	-14
	SAX, F	City/ State and Zip Code	2
_	SAEAHCHA E-mail address: (to be us	PRCIZE Q YAI	100, Com notification)
For further information (	concerning this matter, pleas	se call:	
Henry Lo	Comact Person	at ( <u>904</u> Area Coo	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	urtment of State.
\$35 Filing Fee	E\$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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

LANZ AYENUE Chi (Name of Corporation	1D DEVELOPMENT CONTROL # 1 1 as currently filed with the Florida Dept. of State)
P910C	m08m91
(Docume)	nt Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the cor	poration:
A/A	Thenew
name must be distinguishable and contain the word "corp" "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrevi	poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word ation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	RESS )
	. 22
	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	وسويرد تُصِي الله عليه الله الله الله الله الله الله الله ا
(Maning anaress MAT BE A POST OFFICE BOX	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent A	
	(Florida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	tered Agent:
	am familiar with and accept the obligations of the position.
Signatu	ure of New Registered Agent, if changing

Check if applicable  $\Box$  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>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addiçs</u> s
1) Change	_\$_	LEGITUCE MUDAMBAD	PO BOX 61411
Add X Remove			SACKSONULE, EL
2)Clange	5	HOUSA PICHARDSON	70 Box 61411
_×_ Add			SACKSONVILLE, F
Remove 3) Change			32236
Add			
Remove			
4) Change		***************************************	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

Attach adamomu sneets, ty necessary	Articles, enter chang v). (Be specific)	<del></del>		
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f an amendment provides for an eventual provisions for implementing the autient (if not applicable, indicate N/A)	mendment if not co	ation, or cancellation ntained in the amend	of issued shares, Iment itself:	
				······································

The date of each amendment(s) adop	tion: 5/25/23	, if other than the
date this document was signed.	-, <i>,</i> -	
Effective date if applicable:	_	
and the date in approximate.	(no more than 90 days after amendment	file date)
Note: If the date inserted in this block document's effective date on the Depart	does not neet the applicable statutory filing real	quirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	d by the incorporators, or board of directors witho	out shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffice	d by the shareholders. The number of votes east fient for approval.	or the amendment(s)
☐ The amendment(s) was/were approvement be separately provided for each	ed by the shareholders through voting groups. The hypothesis group entitled to vote separately on the d	ne following statement nmendment(s):
"The number of votes cast for	the amendment(s) was/were sufficient for approve	al
by		_,"
	(voting group)	
selected, b	tor, president or other officer – if directors or officey an incorporator – if it the hands of a receiver, trifiduciary by that fiduciary)	rustee, or other court
	(Typed or printed name of person signing	)
	PusiDent	
<del></del>	(Title of person signing)	