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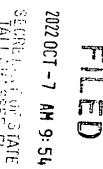
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Tallahassee, FL 32314

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: OFFICE FURNITURE DEPOT, INC. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: WILLIAM LINK Name of Contact Person REED MAWHINNEY & LINK Firm/ Company 53 LAKE MORTON DRIVE, SUITE 100 Address LAKELAND, FL 33801 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: WILLIAM LINK Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **□\$43.75** Filing Fee & **□\$43.75** Filing Fee & ☐\$52.50 Filing Fee **\$35** Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

OFFICE FURNITURE DEPOT, INC.

2022 OCT -7 AM 9: 54

(Name of Corporation as currently	v filed with the Florida Dept. of State) NELL NOT HE STATE
P97000003475	r filed with the Florida Dept. of State) RELEAS UF STATE TALLAHASSEE, FI
	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this a lits Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
OFDBB, INC.	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A "chartered," "professional association." or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.,"
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	- N/A
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	NA
D. If amending the registered agent and/or registered office addinew registered agent and/or the new registered office address Name of New Registered Agent	
(Florida str	eet address)
New Registered Office Address:	(City) . Florida(City)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v	with and accept the obligations of the position.
Signature of New R	egistered Agent, 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>PT</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>		<u>Addres</u> s
1) Change		<u> </u>	- \	
Add			MA	
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
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Remove				
5) Change				
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6) Change			<u>.</u> :	
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(fan amandment provides for an ex	achange, reclassification, or cancellation of issued sh	ares
provisions for implementing the at	mendment if not contained in the amendment itself:	<u></u>
(if not applicable, indicate N/A)		
	1	<u></u> -

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more man >n tage sques timestories inter-	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder a action was not required.	ction and shareholder
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	zment
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by(voting group)	
9/27/2022	
Dated	
Signature Dovid Biles	
(By a director, president or other officer – if directors or officers have not be	en
selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)	ourt
appointed inductary by that inductary)	
DAVID BOLES	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)