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COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: GERALD ALAN SINGLETON				
DOCUMENT NUMBER: P9700064034				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
ORISKA G. SINGLETON Name of Contact Person				
Firm/ Company				
1530 NE 19214 AVENUE				
Address				
City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
ORISKA G. SINGLE TON at (352) 317-2371 Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301				

Attention: Chery 1 Mc Mair

Articles of Amendment

to Articles of Incor	poration
OF ALAN SINGLE (Name of Corporation as currently f	TON [iled with the Florida Dept. of State)
P97000064034 (Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatitis</i> Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	1530 NE 1921 AVENUE Gainesville, FL 32609
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1530 NE 1921d AVENUE Gainesville, FL 32609
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent A	· · · · · · · · · · · · · · · · · · ·
(Florida street	address)
New Registered Office Address: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	, Florida
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.

Page 1 of 4

Signature of New Registered Agent, if changing

address of each Officer (Attach additional sheets, Please note the officer/di. P = President; V= Vice Executive Officer: CFO held. President, Treasure Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove	and/or D , if necess rector titl President = Chief F or, Directe l in the fo	irector b ary) e by the fi ; T= Tree inancial or would i llowing m orporatio	eing added: A A A A A A A A A A A A A A A A A A A	Indirector being removed and title, name, and Frustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change,
Example: X Change	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	nes NJA	
X Add	<u>SV</u>	Sally Sr	,	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	-	_		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change	-	_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				

__ Remove

f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
provisions for implementing the amendment if not contained in the amendment itself:	
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: \(\int\) \\ \(\lambda\)	
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 shareholders. The number of votes east for the amendment by the shareholders was/were sufficient for approval.	nt(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):	meni
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by," (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareho action was not required.	lder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Signature (By a director, president or other officer – if directors or officers have not bee selected, by an incorporator – if in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Title of person signing)	