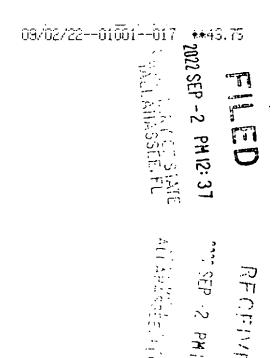
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(Re	equestor's Name)	
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Special Instructions to	Filing Officer.	

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	ATION:	TSCPR Florida, Inc.	<u> </u>	_
DOCUMENT NUMBE	:R:	P97000081031		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
		Melissa Segro		
_		Name of Contact Persor	1	
		The Sembler Compan	у	
_		Firm/ Company		
		5858 Central Avenue	•	
_		Address		707
		St. Petersburg, FL 337	707	12 S
_		City/ State and Zip Code	2	7
		melissa.segrc@sembl	er com	2022 SEP -2 PH 12: 37
_	E-mail address: (to be us	sed for future annual report	notification)	- 5 SE
				101
For further information	concerning this matter, pleas	se call:		31
Meli	ssa Segrc	at (727 _	344-8156	
Name of	Contact Person	Area Co	de & Daytime Telephone N	Number
Enclosed is a check for	he following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status		S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amen Divisi	ng Address dment Section on of Corporations Box 6327	Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

TSCPR Florida, Inc.

180	PR Florida, Inc.		
(Name of Corporation as cu	urrently filed with the Florid	a Dept. of State)	
P9	77000081031		
(Document Nui	mber of Corporation (if knows	1)	
Pursuant to the provisions of section 607.1006. Florida Statute its Articles of Incorporation:	es, this <i>Florida Profit Corpora</i>	ntion adopts the following amendment	(s) t
A. If amending name, enter the new name of the corporati	ion:		
		The new	
name must be distinguishable and contain the word "corporati "Inc.," or Co.," or the designation "Corp," "Inc," or "C "chartered," "professional association," or the abbreviation	To". A professional corpora	rated" or the abbreviation "Corp.," ation name must contain the word	
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	~	
			12 SE
		SEP	<u> </u>
C. Enter new mailing address, if applicable:		2	-
(Mailing address MAY BE A POST OFFICE BOX)		 {	n
		SEL SEL	フ
	<u> </u>	7 ~ · ·	
D. If amending the registered agent and/or registered office		the name of the	
new registered agent and/or the new registered office a	<u>iddress:</u>		
Name of New Registered Agent			
(Flo	orida street address)		
New Registered Office Address:		. Florida	
Hen Registered Office Address.	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far		igations of the position	
т петепу ассері те арронитет из гедімегей адет. Тат за	таат жин ана ассерсте от	зданоть ој те ромнот.	
Signature of	New Registered Agent, if char	nging	
Check if applicable			
☐ The amendment(s) is/are being filed pursuant to s. 607.012	20 (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	PT John D	<u>ooe</u>	
X Remove	<u>V</u> <u>Mike J</u>	ones	
<u>X</u> Add	<u>SV</u> <u>Sally S</u>	mith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	_V, S	EPIFANIO FABREGAS	501 GRAND BOULEVARD LOS PRADOS CAGUAS, PR 00727
X Add			
Remove			
2) Change	VP, Asst. S.	GUILLERMO CRUZ	322 Ave De Diego, Suite 303
Add			San Juan, PR 00920 S
X Remove 3) Change			
Add			
Remove			ララ 山
4) Change			·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	(Be specific)	
		
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		F. 6. 12. 31
fan amandmant provides for an avab	ange, reclassification, or cancellation of issu	and charac
provisions for implementing the ame	ndment if not contained in the amendment i	itself:
(if not applicable, indicate N/A)		

he date of each amendment(s) adoption: ate this document was signed.	03/31/2022	, if other than the
Ifective date if applicable:		
	(no more than 90 days after amendment file	date)
ote: If the date inserted in this block does no ocument's effective date on the Department of		ements, this date will not be listed as the
doption of Amendment(s) (CH	ECK ONE)	
The amendment(s) was/were adopted by the i action was not required.	incorporators, or board of directors without sh	areholder action and shareholder
The amendment(s) was/were adopted by the sby the shareholders was/were sufficient for a		e amendment(s)
The amendment(s) was/were approved by the must be separately provided for each voting	shareholders through voting groups. The follogroup entitled to vote separately on the amend	
"The number of votes cast for the amen	dment(s) was/were sufficient for approval	
by		
(voti	ng group)	
	dent or other officer – if directors of officers b rporator – if in the hands of a receiver, trustee	
	GREGORY S. SEMBLER	
(1	Typed or printed name of person signing)	
	PRESIDENT	202
(**	Title of person signing)	SEP -2 PM 12: 37