Division of Corporations **Electronic Filing Cover Sheet**

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(((H21000013045 3)))



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COR AMND/RESTATE/CORRECT OR O/D RESIGN SOUTHERN SCAPES, INC.

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COVER LETTER

TO: Amendment Sect Division of Corpo				
NAME OF CORPOR	RATION: Southern Scapes, h	nc.		
DOCUMENT NUMBER: P98000052891				
	of Amendment and fee are sul	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	J. David Jeans			
		Name of Contact Person		
	RezLegal, LLC			
		Firm/ Company		
	816 A1A N., Suite 204			
		Address		
	Ponte Vedra Beach, Florida 32082			
		City/ State and Zip Code		
	rezlegal@rezlegal.com			
	E-mail address: (to be us	sed for future annual report r	otification)	
For further information	n concerning this matter, please	se call:		
J. David Jeans		at (904	567-1172	
Name	of Contact Person	Area Cod	e & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depai	rtment of State:	
■ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

H210000130453

Articles of Amendment to Articles of Incorporation of

Southern Scapes, Inc.	
(Name of Corporation as co	urrently filed with the Florida Dept. of State)
P98(KHX)52891	
(Document Nu	imber of Corporation (if known)
ursuant to the provisions of section 607,1006, Florida Statutos Articles of Incorporation:	es, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to
a. If amending name, enter the new name of the corporat	tion:
ILM Partners, Inc.	This Since
ame must be distinguishable and contain the word "corporate Inc.," or Co.," or the designation "Corp," "Inc," or "Cochartered," "professional association," or the abbreviation	tion: The new rion, ""company, " or "incorporation name must contain the word- ""P.A." N/A
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a Name of New Registered Agent	
(Fle	orida street address)
New Registered Office Address:	(City) , Florida (Zip Code)
ew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	Agent: I Agent: I Agent: I Miliar with and accept the obligations of the position. I New Registered Agent, if changing
Signature of	, New Registered Agent, 13 changing
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:	DT	T. L. D.	
X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove 3) Change	 _		
Add			
Remove			
4) Change			
Add			·
Remove			
5) Change			
Add			
Remove			
6) Change			<u> </u>
Add			
Remove			

Attach additional shee	w, y necessary). (be	specific)			
1					
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If an amendment pro	vides for an exchange.	<u>reclassification,</u>	or cancellation of	issued shares.	
(if not applicable	menting the amendme	nt it not containe	d in the amenome	ent itsett:	
	, maicate (N/A)				
Ά					
	- ,, ,				
<u> </u>					 _
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The date of each amendment(s) adoption: date this document was signed.	if other than the
-	
Effective date if applicable: (no more than 90 days after a	mendment file date)
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	filing requirements, this 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 direct action was not required.	tors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders. The number of v by the shareholders was/were sufficient for approval.	otes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting g must be separately provided for each voting group entitled to vote separate	
"The number of votes cast for the amendment(s) was/were sufficient f	or approvał
by	"
(voting group)	
January 8, 2021	
Dated	
Signature Consecutation	
(By a director, president or other officer – if director	ors or officers have not been
selected, by an incorporator - if in the hands of a r	eceiver, trustee, or other court
appointed fiduciary by that fiduciary)	
Jeffrey Donald MacGregor	
(Typed or printed name of person	on signing)
President	
(Title of person signing)	