Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000327278 3)))



H210003272783ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.

Account Number : 076077001702 : (407)841-1200 Phone

: (407)423-1831 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

COR AMND/RESTATE/CORRECT OR O/D RESIGN USTLER II, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

SEP 0 2 2021

S. PRATHER

Electronic Filing Menu

Corporate Filing Menu

Help

က က

Fax: 14078411200

To:

(((H21000327278 3)))

Articles of Amendment			
to			
tricing of Incomparation			

	of		<u>)</u> :
USTLER II, INC.	O1		
	f Corporation as currently	filed with the Florida Dept. of State)	
P98000068880			(2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
F 980000008000	(Document Number of	Corporation (if known)	= 2
	•		ري آيا. مرحمه المراجع من من من
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation adopts the following	
A. If amending name, enter the new na	me of the corporation:		
		<u> </u>	The new
"Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc," or "Co". A or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviat professional corporation name must conta	ion Corp., in the word
B. Enter new principal office address, (Principal office address MUST BE A S	TREET ADDRESS)		
C. Enter new mailing address, if appli	cable:		
(Mailing address MAY BE A POST	<u>OFFICE BOX</u>)		
If amending the registered agent an new registered agent and/or the new	d/or registered office address:	ess in Florida, enter the name of the	
	Craig T. Ustler		
Name of New Registered Agent		4- 200	
	800 N. Orange Avenue, Sui		-
	Orlando	3280	l
New Registered Office Address:		, Florida	Code)
	ı	· ·	,
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar w	ith and accept the obligations of the position	
	سين	•	
	Signature of New Pe	gistered Agent, if changing	_
	organizare of new Ke	guierou rigorii, y orionigirig	
Check if applicable			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

Fax: (850) 617-6380

(((H21000327278 3)))

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)

From: Leslie Perryman

Example:

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.

X Change	PT Jo	hn Doe	
X Remove	<u>v</u> <u>M</u>	ike Jones	
<u>X</u> Add	<u>\$V</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	Title	Name	Address
1) X Change	D	F. Thomas Ustler	800 N. Orange Ave., Suite 200
Add			Orlando, FL 32801
Remove 2) X Change	PVSTD	Craig T. Ustler	800 N. Orange Ave., Suite 200
Add			Orlando, FL 32801
Remove 3) Change		,	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

From: Leslie Perryman Fax: 14078411200 To: Fax: (850) 617-6380 Page: 4 of 5 09/01/2021 3:34 PM

(((H21000327278 3)))
E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)
N/A
The state of the s
F. If 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)
N/A

From: Leslie Perryman

To:

President

(Title of person signing)

Fax: (850) 617-6380

Page: 5 of 5 09/01/2021 3:34 PM

	(((H21000327278 3)))			
The date of each amendment(s) addate this document was signed.	option:	if other the	an the	
Effective date <u>if applicable</u> :	(no more than 90 days after umendment file date)			
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed	as the	
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and	shareholder		
☐ The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.			
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	ALLA!	2021 SEP	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	Arr	ו בט	
by	(voting group)	₽° -	-1 PM 1:01	CED
Signature	W.	- -	සා	
selected	rector, president or other officer – if directors or officers have not been i, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)			
	Craig T. Ustler			
•	(Typed or printed name of person signing)			