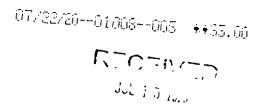
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Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	





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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Edwin B. Garrison.	CPA, PA	· · · · · · · · · · · · · · · · · · ·	
	BER:			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Edwin B. Garrison			
	Name of Contact Person			
	Edwin B. Garrison, CPA, PA			
	Firm/ Company			
	809 South Bay Street - Unit #	4		
	Address			
	Eustis, FL 32726			
		City/ State and Zip Code	2	
	bigedepa@aol.com			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
Edwin B. Garrison		at ( 352	de & Daytime Telephone Number	
Name of Contact Person		Area Coo	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	☐\$43.75 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		Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303	

## Articles of Amendment to Articles of Incorporation of

(Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  Not Applicable  The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS  Not Applicable	Edwin B. Garrison, CPA, PA	( 1 2.07
(Document Number of Corporation (if known)  Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:  N. If amending name, enter the new name of the corporation:  Not Applicable  The new amendment be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," Inc.," or Co.," or the designation "Corp.," "Inc.," or Co.," a professional corporation name must contain the word chartered." "projessional association," or the abbreviation "P.A."  3. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS.)  C. Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  Not Applicable  Not Applicable  Not Applicable  Not Applicable  Not Applicable  (Flarida street address)  Not Applicable  (Flarida street address)  New Registered Office Address:  New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	(Name of Corporation as	currently filed with the Florida Dept. of State)
Pursuant to the provisions of section 607,1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to so Articles of Incorporation:  N. If amending name, enter the new name of the corporation:  Not Applicable  The new amenust be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," the," or "Co.", a professional association, "or the abbreviation "P.A."  3. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS.)  Not Applicable  (Guiling address MAY BE A POST OFFICE ROX)  Not Applicable  Not Applicable  Not Applicable  Not Applicable  (Florida street address)  Not Applicable  (City)  (City (Zip Code)	P9900000691	
A. If amending name, enter the new name of the corporation:  Not Applicable	(Document N	lumber of Corporation (if known)
Not Applicable The new ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "thc.," or "Co.," a professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS.)  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  Not Applicable    Not Applicable	Pursuant to the provisions of section 607,1006, Florida Statuits Articles of Incorporation:	ites, this Florida Profit Corporation adopts the following amendment(s) to
Anne must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp," "Inc.," or "Co.," or the designation "Corp," "Inc," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  8. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS    C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  Not Applicable  (Florida street address)  New Registered Office Address:  (City)  (City)  (Zip Code)  Not Repositions of the position.	A. If amending name, enter the new name of the corpora	ation:
Anne must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.,"  Inc.," or Co.," or the designation "Corp.,"  Inc.," or Co., " or the designation "Corp.,"  Inc., or Co., " or "Inc.," or "Inc., or "Inc	Not Applicable	The new
Principal office address MUST BE A STREET ADDRESS    Principal office address MUST BE A STREET ADDRESS    Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)    Not Applicable	"Inc.," or Co.," or the designation "Corp." "Inc," or	ntion," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  Not Applicable  (Florida street address)  New Registered Office Address:  (City)  Florida (Zip Code)  New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	R. Vitter new principal office address if applicable.	Not Applicable
O. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:    Name of New Registered Agent		<u></u>
O. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:    Name of New Registered Agent		
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D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:    Not Applicable	C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Not Applicable
Name of New Registered Agent  New Registered Office Address:  New Registered Office Address:  (City)  New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	(100000)	
Name of New Registered Agent  New Registered Office Address:  New Registered Office Address:  (City)  New Registered Agent's Signature, if changing Registered Agent:  hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		
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(Florida street address)  New Registered Office Address:		address:
New Registered Office Address:  (City) , Florida (Zip Code)  New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	Name of New Registered Agent Not Applicable	
New Registered Office Address:  (City) , Florida (Zip Code)  New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		
(City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  hereby accept the appointment as registered agent.—I am familiar with and accept the obligations of the position.	<del></del>	lorida street address)
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent.—I am familiar with and accept the obligations of the position.	New Registered Office Address:	Florida
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		(City) (Zip Code)
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		
	New Registered Agent's Signature, if changing Registere	ed Agent:
Signature of New Registered Agent, if changing	I hereby accept the appointment as registered agent. I am j	familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing		
Signature of New Registered Agent, if changing		
	Signature (	of New Registered Agent, if changing
Theck if applicable	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.

X Change	<u>PT</u> <u>John</u>	n Doc	
X Remove	<u>V</u> <u>Mik</u>	<u>se Jones</u>	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Т	Amanda N. Bennett	2352 Natoma Blvd
X Add			Mount Dora, FL 32757
Remove			
2) Change	P/S	Edwin B. Garrison	809 South Bay St - Unit #4
Add			Eustis, FL 32726
Remove Change			
Add			
Remove			<del></del>
4) Change			
Add			
Remove			
5) Change		<del></del>	
Add			
Remove			
6) Change			
Add			
Remove			

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If an amendment provi	des for an exchange	reclassification,	or cancellation of	issued shares,	
provisions for implem (if not applicable, i	enting the amendm Indicate N/A)	ent it not contain	ed in the amendm	ent itsell:	
12					
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ot Applicable					

The date of each amendment	July 6, 2020 s) adoption:	, if other than th
date this document was signed.	· · · · · · · · · · · · · · · · · · ·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Effective date if applicable:	July 6, 2020	
	(no more than 90 days after amendment file date	)
	his block does not meet the applicable statutory filing requirement of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/wer action was not required.	adopted by the incorporators, or board of directors without shareh	older action and shareholder
■ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the an re sufficient for approval.	nendment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	
	cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
July 1. Dated	. 2020	
Signature	Ele 3 Janvon	
(B) se	a director, president or other officer – if directors or officers have ected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	
	Edwin B. Garrison	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	