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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: LNH Consulting, I	nc			
	IBER: P99000054805		·		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	John M Hamilton				
		Name of Contact Person	n		
	Firm/ Company				
	3062 Rolling Hills Lane				
		Address			
	Marianna, FL 32446				
		City/ State and Zip Cod	e		
	jhami66303@earthlink.net				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
John M Hamilton		at (850			
Name	of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address			Address		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee			
	llahassee, FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



LNH Consulting, Inc	2021 DEC
(Name of Corporation as currently	r filed with the Florida Dept. of State)
P99000054805	range in the second
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
LNH Investment Holdings, Inc.	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NIA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
Name of New Registered Agent	NIA
(Florida stre	pet address)
New Registered Office Address:	(City) Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	egistered Agent, if changing
Check if applicable	

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

P = President: V = Vice Executive Officer: CFO President, Treasurer, Di Changes should be note a change, Mike Jones le Mike Jones, V as Remov	s, if neces, irector tit. Presiden = Chief F rector wo d in the fo aves the c	sary) le by the first letter of the office title: l: T= Treasurer; S= Secretary; D= Directorinancial Officer. If an officer/director hold: buld be PTD, ellowing manner. Currently John Doe is lis corporation, Sally Smith is named the V and	or; TR= Trustee; C = Chairman or Clerk; CEO = Chiefe more than one title, list the first letter of each office held, ted as the PST and Mike Jones is listed as the V. There is S. These should be noted as John Doe, PT as a Change,
Example: X_Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		-	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			<u> </u>
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			

___ Add

__ Remove

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

tach additional sheets, if necessary).	(Be specific)			
		Ι. Λ		
		NIA	·	
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<u> </u>	,			
an amendment provides for an excha	nge, reclassific	ation, or cancellati	on of issued shares.	1
rovisions for implementing the amen (if not applicable, indicate N/A)	dment if not co	ntained in the ame	ndment itself:	
		N/A		
				
				
			·	
				

	t(s) adoption:	, if other than the
date this document was signed		
Effective date if applicable:	December 01, 2021	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, thi he Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder	action and shareholder
	re adopted by the shareholders. The number of votes cast for the amendmere sufficient for approval.	ient(s)
	re approved by the shareholders through voting groups. The following started for each voting group entitled to vote separately on the amendment(s):	tement
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Decer Dated	nber 01, 2021	
Signature	Lisa n Hamilton	
Se	By a director, president or other officer – if directors or officers have not be elected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
	Lisa N Hamilton	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	