## 330107

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TALLAHASSEF - ORATIONS

C. BRUMBLEY
JAN 1 0 2022

## **COVER LETTER**

Division of Corporations Managemen + Realty, Inc. NAME OF CORPORATION: <u>Hent</u> Strawss DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Genuico Drive elizabeth@hentstraussmanagement.com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$52.50 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & S35 Filing Fee Certified Copy Certificate of Status Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed)

**Mailing Address** 

TO: Amendment Section

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

## Articles of Amendment to Articles of Incorporation

Ment Hrauss Manager		ty The
530107		
	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation a	dopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		The new
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". 2 "chartered," "professional association," or the abbreviation "P.A."	A professional corporation i	or the abbreviation "Corp.," name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	MA	
		202
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	EP - 7
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ress in Florida, enter the na	, T. 9
Name of New Registered Agent Elizabeth		·
(Florida st	reet address)	
New Registered Office Address:	(City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	<u>t:</u> with and accept the obligatio	ons of the position.
Signature of New 1	Registered Agent, if changing	

 $\Box$  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	PT John D	<u>oe</u>	
X Remove	<u>V</u> <u>Mike J</u>	<u>ones</u>	
X Add	SV Sally S	<u>mith</u>	
Type of Action	Title	Name	Address
(Check One)  1) Change	P	Kent Strauss	1403 N. Randolph Ci Tallahassee, FC
Add Remove 2) Change Add	ST	Susan Strauss	1403 N. Randolph Cir. Tallahassee, FC
	?	Elizabeth Strawss	401 Terrace stret Tallahassee, FC 32308
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add	<u></u>		
Remove			

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NA	ets, if necessary).	(Be specific)				
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The date of each amendment(s) a date this document was signed.	doption: Joly 30, 2021	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this epartment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad- action was not required.	opted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were ad- by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendmufficient for approval.	ient(s)
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following started voting group entitled to vote separately on the amendment(s):	tement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated		
//aica		
Signature	lirector, president or other officer – if directors or officers have not b	een —
selecti	ed, by an incorporator - if in the hands of a receiver, trustee, or other	court
арроіл	ited fiduciary by that fiduciary)	
	Elizabeth Strauss	
	(Typed or printed name of person signing)	
	Dresident	
	(Title of person signing)	