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(Re	equestor's Name)		
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(Cit	ty/State/Zip/Phone	/ /	
PICK-UP	TIAW	MAIL	
(Bu	siness Entity Name	<u> </u>	
(Do	ocument Number)		
Certified Copies	_ Certificates o	of Status	
Special Instructions to Filing Officer:			
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	J. HORNE		
	JUL 1 2 2023	}	

Office Use Only



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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form for filing *Articles of Amendment* to amend the articles of incorporation of a *Florida Profit Corporation* pursuant to section 607.1006, Florida Statutes. This is a basic amendment form and may not satisfy all statutory requirements for amending.

A corporation can amend or add as many articles as necessary in one amendment.

- > The original incorporators cannot be amended.
- If amending the name of the corporation, the new name must be distinguishable on the records of the Florida Department of State. A preliminary search for name availability can be made through the Division's website at www.sunbiz.org. You are responsible for any name infringement that may result from your corporate name selection.
- > If amending the registered agent, the new agent must sign accepting the appointment and state that he/she is familiar with the obligations of the position.
- If amending/adding officers/directors, list titles and addresses for each officer/director.
- If amending from a general corporation to a professional corporation, the purpose (specific nature of business) must be amended or added if not contained in the articles of incorporation.

If a section is not being amended, enter N/A or Not Applicable. The document must be typed or printed and must be legible.

Pursuant to section 607.0123. Florida Statutes, a delayed effective date may be specified but may not be later than the 90th day after the date on which the document is filed.

Filing Fee \$35.00 (Includes a letter of acknowledgment)

Certified Copy (optional) \$8.75

Certificate of Status (optional) \$8.75

Send one check in the total amount made payable to the Florida Department of State.

Please include a letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

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

For further information you may call the Amendment Section at (850) 245-6050

CR2E011 (1/20)

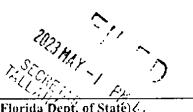
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: The Open Rose, In	ic.			
DOCUMENT NUM	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:			
	Denise McDonald				
		Name of Contact Person			
	The Open Rose, Inc.				
	Firm/ Company				
	6434 Open Rose Drive				
	Address				
	Milton, FL 32570				
	City/ State and Zip Code				
	charlie@arrowemb.com				
	_	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se call: at (850	, 748-6931		
Name of Contact Person		Area Code & Daytime Telephone Number			
Enclosed is a check for	r the following amount made	payable to the Florida Depa	rtment of State:		
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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

Articles of Amendment to Articles of Incorporation of



The Open Rose, Inc.

(Name of Corporation as current	ly filed with the Florida Dept. of State) (
V05828			
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
DMac&C Properties, Inc.	The new		
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word		
B. Enter new principal office address, if applicable:	3885 Scott's Plaza		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Jay, FL 32565		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1451 Lewis Road		
	Milton, FL 32570		
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address			
Name of New Registered Agent			
(Floridu s	treet address)		
New Registered Office Address:	(City) , Florida(Zip Code)		
	(City) (Zip Code)		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	it:		
t nereoy accept the appointment as registered agent. I am jamittar	with and accept the obligations of the position.		
Simplure of New	Registered Agent, if changing		
Č ,	negmerea agent, y changing		
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.

Example:

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change			<u> </u>
Add			10.
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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an amendment pro rovisions for imple (if not applicable	menting the amendme	ent if not containe	or cancellation of <u>i</u> d in the amendme	ssued shares, nt itself:	
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The date of each amendmen	t(s) adoption: April 25, 2023	, if other than the
date this document was signed		
Effective date if applicable:	June 1, 2023	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this dhe Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wes action was not required.	re adopted by the incorporators, or board of directors without shareholder act	ion and shareholder
☐ The amendment(s) was/web by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendmentere sufficient for approval.	(s)
☐ The amendment(s) was/wer must be separately provide	re approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	,,	
	(voting group)	
Dated April Signature	Ju McDrald	
(B	y a director, president or other officer - if directors or officers have not been	
se ap	lected, by an incorporator – if in the hands of a receiver, trustee, or other coupointed fiduciary by that fiduciary)	rt
	Denise McDonald	
	(Typed or printed name of person signing)	
	PD	
	(Title of person signing)	