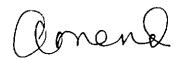
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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates o	f Status
Special Instructions to Fili	ing Officer:	
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2022 SEP 22 PH 12 2

A. RAMSEY SEP 22 2022

COVER LETTER

Division of Corporations FOLMES-GLOVER-SOLOMON, INC. DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: EMMOTT L-MATTHEWS, SR. HOLMES-GLOVER-SOLOMON, INC. 34 BRENTWOOD AVENUE TACKSDNVILLE FZ 32206

City/ State and Zip Code NGLAWREN @ LPNLAW, 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: S35 Filing Fee **□\$**43.75 Filing Fee & \$52.50 Filing Fee □\$43.75 Filing Fee &

Certified Copy

enclosed)

(Additional copy is

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Certificate of Status

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Certificate of Status

Certified Copy

(Additional Copy is enclosed)

FILED

Articles of Amendment

Articles of A	2022 SEP 22 PH 12 24
Articles of Inc	corporation 2022 CER CE
HOLMES- GLOVER - SOC	
(Name of Corporation as current	y filed with the Florida Dept, of State)
1/3325	1
(Document Number o	f 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:	
	n1/1
name must be distinguishable and contain the word "corporation," "on "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	professional corporation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/+
<u> </u>	
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	A
(Florida stre	et oddress)
	C1 ddu/23/
New Registered Office Address:	Cin) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent; I hereby accept the appointment as registered agent. I um familiar w	ith and accept the obligations of the position.
NA	
Signature of New Re	gistered Agent, if 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 tale 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	PT John Doe	
X Remove	V Mike Jones	
_X Add	SV Sally Smith	
Type of Action (Check One)	Title Name	Address
() Change	DPST Rose N. Walker	
Add		Jacksmille FL 32201
Remove	DOST Command L. Mother	12211 Prostant Are
2) Change Add	DPST Emmett L. Matthews,	Jackson ville FC3220
Remove 3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6)Change		
Add		
Remove		

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If an amend provisions	iment provides for implement	for an exchaning the amend	ige, reclassifica	tion, or cancell stained in the a	lation of issued meadment its	<u>l shares.</u> elf:	
(if not	applicable, indi	cate N/A)					
		Not	cig	plical	1C_	 	
		<u> </u>	<u> </u>				
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The date of each amendment(s) adoption: A1060ST 17, 2027, if other than the date this document was signed.
Effective date is applicable: AUGUST 29 7027 (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
(Typed of printed (time of person signing)
(Title of person signing)
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