4863 SABLE PII	ncipal Place of Business: NE CIR # G EACH, FL 33417		32587364	104CC
Current Mail	ling Address:			
	PINE CIRCLE			
# G WEST PALN	1 BEACH, FL 33417 US			
FEI Number: 47-4784600 Certifica		Certificate of Status Desire	ed: No	
Name and A	ddress of Current Registered Agent:			
BURKE, LORRA 4853 SABLE PII WEST PALM BE	EACH, FL 33417 US			
4853 SÁBLE PII WEST PALM BE		tered office or regist	ered agent, or both, in the State of Floric	la.
4853 SABLE PII WEST PALM BE	EACH, FL 33417 US	tered office or regis		^{la.} 03/01/2021
4853 SABLE PII WEST PALM BE	EACH, FL 33417 US	tered office or regis		
4853 SABLE PII WEST PALM BE	EACH, FL 33417 US I entity submits this statement for the purpose of changing its regis E BURKE, LORRAINE Electronic Signature of Registered Agent	tered office or regis		03/01/2021
4853 SÁBLE PII WEST PALM BE The above named SIGNATURE	EACH, FL 33417 US I entity submits this statement for the purpose of changing its regis E BURKE, LORRAINE Electronic Signature of Registered Agent	tered office or regis		03/01/2021
4853 SÁBLE PII WEST PALM BE The above named SIGNATURE Officer/Direc	EACH, FL 33417 US I entity submits this statement for the purpose of changing its regis E: BURKE, LORRAINE Electronic Signature of Registered Agent Ctor Detail :			03/01/2021
4853 SÁBLE PII WEST PALM BE The above named SIGNATURE Officer/Direc Title	EACH, FL 33417 US d entity submits this statement for the purpose of changing its regis E BURKE, LORRAINE Electronic Signature of Registered Agent Ctor Detail : PRESIDENT	Title	VP	03/01/2021
4853 SÁBLE PII WEST PALM BE The above named SIGNATURE Officer/Direc Title Name Address	EACH, FL 33417 US entity submits this statement for the purpose of changing its regis E BURKE, LORRAINE Electronic Signature of Registered Agent ctor Detail : PRESIDENT BURKE, LORRAINE	Title Name Address	VP LUGO, JOSE	03/01/2021
4853 SÁBLE PII WEST PALM BE The above named SIGNATURE Officer/Direc Title Name Address	EACH, FL 33417 US d entity submits this statement for the purpose of changing its regis E BURKE, LORRAINE Electronic Signature of Registered Agent Ctor Detail : PRESIDENT BURKE, LORRAINE 4863 SABLE PINE, #G	Title Name Address	VP LUGO, JOSE 4863 SABLE PINE, #G	03/01/2021
4853 SÁBLE PII WEST PALM BE The above named SIGNATURE Officer/Direc Title Name Address	EACH, FL 33417 US d entity submits this statement for the purpose of changing its regis E BURKE, LORRAINE Electronic Signature of Registered Agent Ctor Detail : PRESIDENT BURKE, LORRAINE 4863 SABLE PINE, #G	Title Name Address	VP LUGO, JOSE 4863 SABLE PINE, #G	03/01/2021

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LORRAINE BURKE

PRESIDENT

03/01/2021

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P15000068494

Entity Name: AMERICAN HEROES INVESTMENTS, INC.

Date