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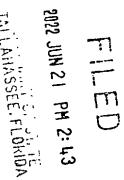
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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

		_		
NAME OF CORPORA	ATION: FREDLE	CHELCR DP	M PA-	
DOCUMENT NUMBE	CR: <u>PO4000</u>	157651		
The enclosed Articles of	Amendment and fee are sul	bmitted for filing.		
Please return all correspo	ondence concerning this ma	tter to the following:		
	FRED LES	Name of Contact Person HELER DP Firm/ Company Address YENA BEACE City/ State and Zip Code	M 4A-	Υ
_	E-mail address: (to be us	ed for future annual report	notification)	
For further information of	concerning this matter, pleas	se call:		
FRED LE	CHILER, OP	at (38 6 Area Coo	de & Daytime Telephone Number	
Enclosed is a check for t	the following amount made	payable to the Florida Depa	ertment of State:	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amen Divisi	ng Address dment Section on of Corporations Box 6327	Amend Divisio	Address ment Section n of Corporations entre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

Articles of Incorporation

	of	
_		\sim

FRAD LECHELER DPA	n PA
(Name of Corporation as currently	filed with the Florida Dept. of State)
PO 400 157651	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this 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:	
	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 MUST BE A STREET ADDRESS)	522 FAULENER ST NEW SMYRNA BEACH, Pc. 32168
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 1034 DEW SMYENA BEACH, P(. 32170-1034
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 FRED LE	CHILL
	eet address)
New Registered Office Address: PEW SM	(City) SEACH, Florida 32168 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	
Signature of New Re	Zelle Dpp
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	PT	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	
l) Change		/A		
Add		• /		
Remove				
2) Change				
Add			2022 TÁLL	
Remove 3) Change				<u></u>
Add			\$55 2	
Remove			PR PR	
4) Change			PM 2: 43	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)			
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N/A			-
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f an amendment provides for an exchange, reclassification, or cancellation of issued shares,			
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)			
			-
P/ &			_
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		_	_
		,	-

The date of each amendment(s) adoption: _ date this document was signed.	JUNE	14, 20	075		_, if oth	er than
Effective date <u>if applicable</u> :	(no more than 90		ment file date)			
Note: If the date inserted in this block does document's effective date on the Department of		ble statutory filin	g requirements, this	date will r	not be l	isted as
Adoption of Amendment(s) (C	HECK ONE)					
The amendment(s) was/were adopted by the action was not required.	e incorporators, or bo	oard of directors w	rithout shareholder a	ction and s	harehol	der
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		number of votes c	ast for the amendme	nt(s)		
☐ The amendment(s) was/were approved by t must be separately provided for each votin "The number of votes cast for the ame	g group entitled to ve	ote separately on	the amendment(s):	TÄLLÄ	2022 JUN 2	-11
by	oting group)			HASSI	21	
Signature (By a director, pre selected, by an inc	sident or other office corporator – if in the ry by that fiduciary)				PM 2: 43	
_F	RED LE	CHE(Z		1		
$\underline{\hspace{0.1cm}}\mathcal{P}_{\ell}$	(Title of person sign	<u>6F (οη</u> ρ ning)	URATION			_

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