## PD2000082439

| (Requestor's Name)                      |  |  |  |
|---|--|--|--|
| (Address)                               |  |  |  |
| (Address)                               |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |
| (Business Entity Name)                  |  |  |  |
| (Document Number)                       |  |  |  |
| Certified Copies Certificates of Status |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

| NAME OF CORP   | ORATION: COMPRESSED C                       | GAS SOLUTIONS, INC.  |  |  |  |
|--|---|--|--|--|--|
| DOCUMENT NU  | MBER:                                       |  |  |  |  |
|  | les of Amendment and fee are su             | abmitted for filing.   |  |  |  |
| Please return all co   | rrespondence concerning this ma             | tter to the following:   |  |  |  |
|  | Robert Fine                                 |  |  |  |  |
|  | Name of Contact Person                      |  |  |  |  |
|  | Compressed Gas                              |  |  |  |  |
|  |   | Firm/ Company  |  |  |  |
|  | 1212 Chelsea Pl                             |  |  |  |  |
|  |   | Address  |  |  |  |
|  | Orlando, FL 32803                           |  |  |  |  |
|  |   | City/ State and Zip Cod  | e  |  |  |
| D.   | ine9@ctl.rr.com                             |  |  |  |  |
| — KI   |   | sed for future annual report   | notification)  |  |  |
|  | is than address, to be a                    | sed for fature annual report   | nomeanny   |  |  |
| For further informa  | tion concerning this matter, pleas          | se call:   |  |  |  |
| Benjamin Michaelson, Esq.  |   | 203<br>at (  | 789-0001   |  |  |
| Name of Contact Person   |   | Area Code & Daytime Telephone Number                                       |  |  |  |
| Enclosed is a check  | for the following amount made               | payable to the Florida Depa  | urtment of State:  |  |  |
| □ \$35 Filing Fee  | ■\$43.75 Filing Fee & Certificate of Status | ☐S43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | ☐\$52.50 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 |   | Amend<br>Divisio<br>Clifton  | Address Iment Section on of Corporations Building Executive Center Circle              |  |  |

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation of

|   | Amendment -  |
|---|--|
| to<br>Articles of In  | organization (2.5)   |
| of  | f ES S   |
| COMPRESSED GAS SOLUTIONS, INC.  | Amendment of the corporation of  |
| (Name of Corporation as current   | tly filed with the Florida Dept. of State)   |
| P02000082439  | and the second s |
| (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 amendments   |
| A. If amending name, enter the new name of the corporation:   |  |
| OLD CGS, INC.   | The new  |
| name must be distinguishable and contain the word "corporatio<br>"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or word "chartered," "professional association," or the abbreviation | on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."  |
| B. Enter new principal office address, if applicable:   | 1212 Chelsea Pl  |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )   | Orlando, FL 32803  |
|   |  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)   | 1212 Chelsea Pl  |
| <u></u>   | Orlando, FL 32803  |
|   |  |
|   |  |
|   | lress in Florida, enter the name of the  |
| D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address  |  |
| new registered agent and/or the new registered office address   |  |
|   | <u> </u>   |
| new registered agent and/or the new registered office address  Name of New Registered Agent   | <u> </u>   |
| new registered agent and/or the new registered office address  Name of New Registered Agent   | reet address)  |

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                      | $\underline{\mathbf{V}}$ | Mike Jones   |                 |
| X Add                         | <u>sv</u>                | Sally Smith  |                 |
| Type of Action<br>(Check One) | <u>Title</u>             | Name         | <u>Addres</u> s |
| 1) Change                     |                          | <del>.</del> |                 |
| Add                           |                          |              | <del></del>     |
| Remove                        |                          |              | <del></del>     |
| 2) Change                     |                          |              |                 |
| Add                           |                          |              |                 |
| Remove                        |                          |              |                 |
| 3 ) Change                    |                          |              |                 |
| Add                           |                          |              |                 |
| Remove                        |                          |              |                 |
| 4) Change                     |                          |              |                 |
| Add                           |                          |              |                 |
| Remove                        |                          |              |                 |
| 5) (1)                        |                          |              |                 |
| 5) Change                     |                          | <del></del>  |                 |
| Add                           |                          |              |                 |
| Remove                        |                          |              |                 |
| 6) Change                     |                          |              |                 |
| Add                           |                          |              |                 |
| Remove                        |                          |              |                 |

|                                      | ticles, enter change(s) here: (Be specific)  |
|--------------------------------------|--|
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| 16                                   | hanna mahan 20 melangan mengahan dianggan dan  |
| provisions for implementing the arm  | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| Krovizionz for unbiguighting rug ame |  |
| (if not applicable, indicate N/A)    |  |

| The date of each amendment(s date this document was signed.        | adoption:   | , if other than the       |
|--|---|---------------------------|
| Effective date <u>if applicable</u> :                              |   |                           |
|  | (no more than 90 days after amendment file date)  |                           |
| Note: If the date inserted in the document's effective date on the | s block does not meet the applicable statutory filing requirements, this date Department of State's records.  | will not be listed as the |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )  |                           |
| ■ The amendment(s) was/were by the shareholders was/were           | adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.   |                           |
|  | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):  |                           |
| "The number of votes of  | ast for the amendment(s) was/were sufficient for approval   |                           |
| by   | "   |                           |
|  | (voting group)  |                           |
| ☐ The amendment(s) was/were action was not required.               | adopted by the board of directors without shareholder action and shareholder  |                           |
| ☐ The amendment(s) was/were action was not required.               | adopted by the incorporators without shareholder action and shareholder   |                           |
| Septeml<br>Dated   | per 28, 2018  |                           |
| Signature  | R) S  |                           |
| (By sele   | a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary) |                           |
|  | Robert Fine   |                           |
|  | (Typed or printed name of person signing)   | <del></del>               |
|  | Vice-President  |                           |
|  | (Title of person signing)   |                           |