## P110000 87428

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (Ad                     | ldress)            |           |
| (Ad                     | ldress)            |           |
| (Cit                    | ty/State/Zip/Phone | e #)      |
| PICK-UP                 | ☐ WAIT             | MAIL      |
| (Bu                     | isiness Entity Nan | ne)       |
| (Do                     | ocument Number)    |           |
| Certified Copies        | _ Certificates     | of Status |
| Special Instructions to | Filing Officer:    |           |
|                         |                    |           |
|                         |                    |           |
|                         |                    |           |

Office Use Only

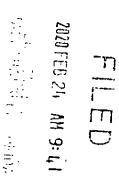


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## COVER LETTER

**TO:** Amendment Section Division of Corporations

| NAME OF CORI              | PORATION: MUNDAKA TEC  | CHNOLOGIES, INC.  |   |
|---------------------------|--|---|---|
| DOCUMENT NU               | MBER: P11000087428   |   |   |
| The enclosed <i>Artic</i> | des of Amendment and fee are su  | bmitted for filing.   |   |
| Please return all co      | orrespondence concerning this ma   | itter to the following:   |   |
|                           | Miren A. Lazo Elguezabal   |   |   |
|                           | <del> </del>   | Name of Contact Person  | 1   |
|                           |  | Firm' Company   |   |
|                           | 20918 Sheridan St  |   |   |
|                           | -  | Address   |   |
|                           | Pembroke Pines, FL 33332   |   |   |
|                           |  | City/ State and Zip Cod   | e   |
|                           | admin@mundakawg.com  |   |   |
|                           | E-mail address: (to be us  | sed for future annual report  | notification)   |
| For further inform        | ation concerning this matter, plea   | se call:  |   |
| Miren A. Lazo Elg         | guezabal   | at ( 317  | 5291032   |
| Nai                       | me of Contact Person   | Area Co   | de & Daytime Telephone Number   |
| Enclosed is a chec        | k for the following amount made  | payable to the Florida Dep  | artment of State:   |
| S35 Filing Fee            | S43.75 Filing Fee & Certificate of Status  | S43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | □852.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)     |
| ,<br>;<br>1               | Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314 | Amenc<br>Divisio<br>The C   | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 |

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

| 3 | MUND | AKA | TECHNOL | OGIES | INC |
|---|------|-----|---------|-------|-----|
|   |      |     |         |       |     |

|  | of Corporation as curren       | itly filed with the Florida Dept, of State)  |           |
|--|--------------------------------|--|-----------|
| P11000087428   |                                |  |           |
|  | (Document Number               | of Corporation (if known)  |           |
| Pursuant to the provisions of section 607 its Articles of Incorporation:   | .1006, Florida Statutes, this  | s Florida Profit Corporation adopts the following amendm   | ent(s) to |
| A. If amending name, enter the new n<br>N/A  | ame of the corporation:        | 77   |           |
| name must be distinguishable and contain<br>"Inc.," or Co.," or the designation "C<br>"chartered," "professional association," | Corp," "Inc." or "Co".         | The new "company," or "incorporated" or the abbreviation "Corp., A professional corporation name must contain the wor" |           |
| B. Enter new principal office address,   | if applicable:                 | N/A  |           |
| (Principal office address <u>MUST BE A S</u>   | TREET ADDRESS )                |  |           |
|  |                                | 100 FE   | n         |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )                                |                                | N/A 22 T   |           |
|  |                                | - 399  | O         |
|  |                                | <u> </u>   |           |
| D. If amending the registered agent at   | nd/or registered office add    | dress in Florida, enter the name of the  |           |
| new registered agent and/or the ne   | w registered office addres     | <u>ss:</u>   |           |
| Name of New Registered Agent   | N/A                            |  |           |
|  |                                |  |           |
|  | tFlorida s                     | street address)  |           |
| New Registered Office Address:   | N/A                            | . Florida  |           |
|  |                                | (City) (Zip Code)  |           |
|  |                                |  |           |
| Store David Annual Advance Chamber 125   | Annual and David Annual Annual |  |           |
| New Registered Agent's Signature, if c<br>I hereby accept the appointment as regis.  |                                | nt: r with and accept the obligations of the position.   |           |
|  |                                |  |           |
|  |                                |  |           |
|  | C:                             | During and Countries to the second   |           |
|  | Signature of New .             | Registered 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)

Example:

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.

| X Change                   | $\overline{\mathbf{b}}$ | John Doe                    |                          |
|----------------------------|-------------------------|-----------------------------|--------------------------|
| X Remove                   | <u>V</u>                | Mike Jones                  |                          |
| X Add                      | <u>sv</u>               | Sally Smith                 |                          |
| Type of Action (Check One) | <u>Title</u>            | <u>Name</u>                 | <u>Addres</u> s          |
| T) Change                  | P                       | FRANCISCO J LASO ELGUEZABAL | 20848 NW 3 CT            |
| Add                        |                         |                             | PEMBROKE PINES, FL 33332 |
| Remove                     |                         |                             |                          |
| 2) X Change                | V                       | MIREN A LAZO ELGUEZABAL     | 1313 BRENDA RD           |
| Add                        |                         |                             | WACONIA, MN 55387        |
| Remove Change              |                         |                             |                          |
| Add                        |                         |                             |                          |
| Remove                     |                         |                             |                          |
| 4) Change                  |                         |                             |                          |
| Add                        |                         |                             |                          |
| Remove                     |                         |                             |                          |
| 5) Change                  |                         | <del>-</del>                |                          |
| Add                        |                         |                             |                          |
| Remove                     |                         |                             |                          |
| 6) Change                  |                         |                             |                          |
| Add                        |                         |                             |                          |
| Remove                     |                         |                             |                          |

| (Attach additional sheets, i          | if necessary). — (Be      | specific)             | <u>re</u> :           |                                       |              |
|---------------------------------------|---------------------------|-----------------------|-----------------------|---------------------------------------|--------------|
| J/A                                   |                           |                       |                       |                                       |              |
|                                       |                           |                       |                       |                                       |              |
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|                                       |                           |                       |                       |                                       |              |
| If an amendment provide               | <u>es</u> for an exchange | , reclassification, o | or cancellation of is | ssued shares,                         |              |
| provisions for implemen               | nting the amendme         | nt if not contained   | d in the amendmer     | ıt itself:                            |              |
| (if not applicable, inc               | dicate N/A)               |                       |                       |                                       |              |
| //A                                   |                           |                       |                       |                                       |              |
|                                       |                           |                       |                       |                                       |              |
|                                       |                           |                       |                       |                                       |              |
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|                                       | _                         |                       |                       |                                       |              |

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| N/A  |
|--|
| The date of each amendment(s) adoption:  |
| late this document was signed.   |
| N/A  |
| Effective date if applicable:  |
| (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 document's effective date on the Department of State's records.          |
| Adoption of Amendment(s) ( <u>CHECK ONE</u> )  |
| ■ 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 east 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)   |
| 02/21/2020   |
| Dated  |
|  |
| 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)   |
| appointed indictary by that indictary)   |
| FRANCISCO J LASO ELGUEZABAL  |
| (Typed or printed name of person signing)  |
| DIRECTOR   |
| (Title of person signing)  |