## P130000000292

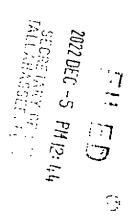
| (Rea                      | uestor's Name)   | <u> </u>    |
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| Certified Copies          | Certificates     | of Status   |
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| Special Instructions to F | iling Officer:   |             |
|                           |                  |             |
|                           | J. HORNE         |             |
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Office Use Only



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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO                | DRATION: MICRO EMBEDI  | DED SYSTEMS INC  |   |
|------------------------------|--|--|---|
| DOCUMENT NUN                 | 1BER: P13000000292   |  |   |
| The enclosed Article         | es of Amendment and fee are su   | bmitted for filing.  |   |
| Please return all corr       | espondence concerning this ma  | itter to the following:  |   |
|                              | John Barker  |  |   |
|                              |  | Name of Contact Person   | <u> </u>  |
|                              | MICRO EMBEDDED SYST  | EMS INC  |   |
|                              |  | Firm/ Company  |   |
|                              | 6073 NW 167 ST UNIT C12  |  |   |
|                              | ~1   | Address  |   |
|                              | HIALEAH, FL 33015  |  |   |
|                              |  | City/ State and Zip Code   | e   |
|                              |  |  |   |
|                              | johnesq@gmail.com  | 16.6   |   |
|                              | E-mail address: (to be us  | sed for future annual report                                     | notification)   |
| For further informati        | on concerning this matter, plea  | se call:   |   |
|                              | ,  |  |   |
| JOHN BARKER                  |  | at ( 786   | ) 358 5407  |
| Name of Contact Person       |  | Area Co  | de & Daytime Telephone Number   |
| Enclosed is a check t        | for the following amount made  | payable to the Florida Depa                                      | artment of State:   |
| ■ \$35 Filing Fee            | \$43.75 Filing Fee & Certificate of Status   | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)      |
| An<br>Di <sup>e</sup><br>P.C | nailing Address nendment Section vision of Corporations D. Box 6327 Illahassee, FL 32314 | Amend<br>Divisio<br>The Co                                       | 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

MICRO EMBEDDED SYSTEMS INC

| (Name  | of Corporation as currentl    | y filed with the Florida D   | lept. of State)          |             |
|--|-------------------------------|------------------------------|--------------------------|-------------|
| P13000000292   |                               |                              | FAI S                    | 207         |
|  | (Document Number o            | f Corporation (if known)     |                          |             |
| Pursuant to the provisions of section 607 its Articles of Incorporation:   | .1006, Florida Statutes, this | Florida Profit Corporation   | and adopts the following | <u></u>     |
| A. If amending name, enter the new n   | ame of the corporation:       |                              | <u></u>                  |             |
| Internet Technology Answers Inc.   |                               |                              |                          | The new     |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "Contain "chartered," "professional association," | Corp," "Inc," or "Co". 7      | 1 professional corporation   |                          |             |
| B. Enter new principal office address,   | if applicable:                | N/A                          |                          |             |
| (Principal office address MUST BE A S  |                               |                              |                          | <del></del> |
|  |                               |                              |                          |             |
|  |                               |                              |                          |             |
| C. Enter new mailing address, if appl  |                               | 81/4                         |                          |             |
| (Mailing address <u>MAY BE A POST</u>  | <u>OFFICE BOX</u> )           | N/A                          |                          |             |
|  |                               |                              |                          |             |
|  |                               |                              |                          |             |
| D. If amending the registered agent ar   | nd/or registered office add   | ress in Florida, enter the i | name of the              |             |
| new registered agent and/or the new  |                               |                              | name or the              |             |
| Name of New Registered Agent   | N/A                           |                              |                          |             |
|  |                               |                              |                          |             |
|  | (Florida str                  | eet address)                 |                          |             |
| New Registered Office Address;   | N/A                           |                              | , Florida                |             |
|  |                               | (City)                       | (Zip Co                  | ode)        |
|  |                               |                              |                          |             |
| Now Desistened Ament's Cinnets and if  | hamaina Danistanad Assaut     |                              |                          |             |
| New Registered Agent's Signature, if c<br>I hereby accept the appointment as regist  |                               |                              | ions of the position.    |             |
|  |                               |                              |                          |             |
|  |                               |                              |                          |             |
|  | Signature of New R            | egistered Agent, if changin  | (g                       |             |
|  | enginding of them to          | eganises engenn y enungin    | ^                        |             |

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:<br>X Change          | <u>PT</u>    | John Doe    |                 |
|-------------------------------|--------------|-------------|-----------------|
|                               |              |             |                 |
| X Remove                      | <u>V</u>     | Mike Jones  |                 |
| X Add                         | <u>SV</u>    | Sally Smith |                 |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| I) Change                     |              |             | _               |
| Add                           |              |             |                 |
| Remove                        |              |             |                 |
| 2) Change                     |              | _           | <u> </u>        |
| Add                           |              |             |                 |
| Remove 3 ) Change             |              |             | _               |
| Add                           |              |             |                 |
| Remove                        |              |             |                 |
| 4) Change                     |              |             | _               |
| Add                           |              |             |                 |
| Remove                        |              |             |                 |
| 5) Change                     |              |             | _               |
| Add                           |              |             |                 |
| Remove                        |              |             |                 |
| 6) Change                     |              |             | _               |
| Add                           |              |             |                 |
| Remove                        |              |             |                 |

| E. If amending or adding additional Artic<br>(Attach additional sheets, if necessary). | cies, enter change(s) nere:  (Be specific)                |
|--|---|
| N/A  |   |
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| . If an amendment provides for an excha  | ange, reclassification, or cancellation of issued shares, |
| if not applicable, indicate N/A)   | ndment if not contained in the amendment itself:          |
| N/A  |   |
| 7/1  |   |
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date this document was signed. 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 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 (voting group) Dated 11/29/2022 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) JOHN D BARKER (Typed or printed name of person signing)

PRESIDENT

(Title of person signing)