P14000085815

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Amenda M. 13.11

COVER LETTER

TO: Amendment Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: A 2 Z Aluminum Inc. DOCUMENT NUMBER: P140000 85815 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Oscar Hammono Name of Contact Person Firm/ Company 12807 Circle Lake Drive Hudson, FL 34669
City/ State and Zip Code OSCAr servent @ gmail.com

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Oscar Hammonc at (737) 857-5590 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: į. □\$43.75 Filing Fee & □\$52.50 Filing Fee 😭 \$35 Filing Fee **□**\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clitton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Haz Aluminum Inc	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P14000085815	
(Document Number of Corporation (if known)	
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the s Articles of Incorporation:	following amendment(s
. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation nativered," "professional association," or the abbreviation "P.A."	or the abbreviation ne must contain the
. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	
,	
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	<u></u>
•	
. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	-
Name of New Registered Agent	
Name of New Registered Agem	
(Florida street address)	
New Registered Office Address: Florida	
New Registered Office Address:, Florida, City) (Zip	Code)
D. M. Land Cinner (Calon in Bridge)	
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the	position.
Signature of New Registered Agent, if changing	

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 <math>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	<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
1) Change	T	Daniel Hammond	9408 Wild wood Ave
Add . Remove			Hudson, FL 34669
2) Change			
Remove			
Change Add	<u></u>		
Remove 4) Change			
Add Remove	,		
5) Change			
Add Remove			
6) Change			
Add Remove			

. <u>If</u> (A	. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
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<u>If</u>	f an amendment provides fo	r an exchang	e, reclassifica	tion, or cancel	lation of issued s	hares,
1	provisions for implementing (if not applicable, indica	the amendn	nent if not co	ntained in the a	mendment itself:	•
	(y nor appricable, marca					
	<u> </u>					
						
	•					

The date of each amendment(s) adoption: Oct 31, 2014	, if other than the
date this document was signed.	
Effective date if applicable: Oct 31, 2014 (no more than 90 days after amendment file date)	_
(15 more many aggs grow amenanomyne amey	
Adoption of Amendment(s) (CHECK ONE)	
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 viling 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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 10/31/14 -	
Dated	
Signature // Den Heen	
(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)	
Danie Hannal	
Oscar Hammund (Typed or printed name of person signing)	
· · · · · · · · · · · · · · · · · · ·	
President (Title of person signing)	
(Title of person signing)	