P20 000093289

(Requestor's Name) (Address)	700356540227		
(City/State/Zip/Phone #)	12/21/2001010011	**35. <i>0</i> 0	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	'- UY	proprides 21	
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COVER LETTER

Division of Corporations NAME OF CORPORATION: INFARED PREDECTIVE SURVEYS, INC. DOCUMENT NUMBER: P20000093289 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Joseph Fitzpatrick Name of Contact Person Infared Predictive Surveys, Inc. Firm/ Company 4801 Gulf Blvd, Box 333 Address St. Pete. Beach FL 33706 City/ State and Zip Code joe@infraredpsi.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (301) 831-1978 and or (800) 869-3720

Area Code & Daytime Telephone Number Joseph Fitzpatrick Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee. □\$43.75 Filing Fee & □\$43.75 Filling Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curre	ALLY THEA WITH THE FIAT	
	mer med with the time	ida Dept. of State)
0000093289		
(Document Numbe	r of Corporation (if kno	wn)
suant to the provisions of section 607.1006, Florida Statutes, th Articles of Incorporation:	nis <i>Florida Profit Corpo</i>	ration adopts the following amendment
If amending name, enter the new name of the corporation:		
FRARED PREDICTIVE SURVEYS, INC.		The new
ne must be distinguishable and contain the word "corporation," c., "-or-Co.," or-the-designation "Corp," "Inc," or "Co", vartered," "professional association," or the abbreviation "P.,	A professional corpo	
Enter new principal office address, if applicable:	N/A	~:
incipal office address <u>MUST BE A STREET ADDRESS</u>)		1)1(C
		
		2
Enter new mailing address, if applicable:		~3
(Mailing address MAY BE A POST OFFICE BOX)	N/A	
		<u></u>
	·	
If amending the registered agent and/or registered office a	ddress in Florida, ente	r the name of the
new registered agent and/or the new registered office addr		The Maine of the
Name of New Registered Agent N/A		
nume of sees registered agent 1908		
Florida	street address)	
New Registered Office Address:	(City)	, Florida(Zip Code)
	(Cui)	tzą Code)

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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Remove	·		
Add			
Remove			
4) Change			 <u></u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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

The date of each amendment(s) adoption: December 17, 2020 date this document was signed.	, if other than the
·	
Effective date <u>if applicable</u> : (no more than 90 days after amendment fit	le dater
Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without action was not required.	shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.	the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The finust be separately provided for each voting group entitled to vote separately on the amendment.	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by``	
(voting group)	
Dated December 17, 2020	
Signature 1200 July Patrick (By a director, president or other officer – if directors or officer	a bassa mar bassa
selected, by an incorporator – if in the hands of a receiver, trust	ee, or other court
appointed fiduciary by that fiduciary)	
JOSEPH FITZPATRICK	
(Typed or printed name of person signing)	
PRESIDENT/DIRECTOR	
(Title of person signing)	