P21000026920

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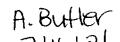
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2021 JUN 15 AM 2: 10 SEGRETARY OF STATE



COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: SEMI DESIGN INC DOCUMENT NUMBER: P21000026920 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: VITA SHYNKARCHUK Name of Contact Person Firm/ Company 4611 N FEDERAL HWY 336 _____ Address POMPANO BEACH, FL 33064 City/ State and Zip Code BYVIKA86@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call; at (954) 821-3915
Area Code & Daytime Telephone Number VITA SHYNKARCHUK 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 Fding Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, Fl. 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2021 JUN 15 AM 2: 10 SEMI DESIGN INC (Name of Corporation as currently filed with the Florida Dept.sof State) P21000026920 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation. A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," name masses assuringuismore and camain are word "carporation," company, or incorporated or the dopreviation Corp.,
"Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 46 H N FEDERAL HWY 336 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) POMPANO BEACH, FL 33064 C. Enter new mailing address, if applicable: 4611 N FEDERAL HWY 336 (Mailing address MAY BE A POST OFFICE BOX) POMPANO BEACH, FL 33064 D. 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: VITA SHYNKARCHUK Name of New Registered Agent 4611 N FEDERAL HWY 336 (Florida street address) POMPANO BEACH New Registered Office Address:

New Registered Agent's Signature, if changing Registered Agent:

I 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

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)

Remove

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. It 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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange	<u>PT</u>	John Doe	
X Remove	$\frac{V}{}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Cheek One)	<u>Title</u>	Name	Address
1) Change	P	ASIM KIZUCUOGLU	11586 PIERSON ROAD L6
Add			WELLINGTON, FL 33414
X Remove			
2) X Change	<u>р</u>	VITA SHYNKARCHUK	4611 N FEDERAL HWY 336
Add			POMPANO BEACH, FL 33064
Remove 3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

f amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/4)	

.

	s) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	tno more than 90 days after amendment j	ile date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing req e Department of State's records.	urrements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors withou	it shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for sufficient for approval.	r the amendment(s)
	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the ar	
"The number of votes of	rast for the amendment(s) was were sufficient for approval	i
by		
	(voting group)	
selo	a director, president/or/other officer – if directors or office reted, by an incorporator – if in the hands of a receiver, tru ointed fiduciary by that fiduciary) VITA SHYNKARCHUK (Typed or printed name of person signing)	stee, or other court
	PRESIDENT	
	(Title of person signing)	