Division of Corporations

Division of Corporations Division of Corporations Plectonic Pling Cover sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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| 10 | To: | Division of Corporations Fax Number : (850)617-6380 |
|-------------|----------------------|--|
| 11 AM 9:45 | From: | Account Name : REGISTERED AGENTS INC. Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010 |
| 787 Ent 787 | er the e annual i | mail address for this business entity to be used for future report mailings. Enter only one email address please.** |

COR AMND/RESTATE/CORRECT OR O/D RESIGN NEXGENCOIN INC.

| Certificate of Status | 0 |
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| Certified Copy | 0 |
| Page Count | 05 |
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Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation

| | of | |
|--|--|-------------------------------------|
| NEXGENCOIN INC. | | <u> </u> |
| (Name of Corporation | on as currently filed with the Florida Dept. of State) | <u>ଜିଲ</u> ഗ * |
| P21000054819 | | شار زب. |
| (Docun | nent Number of Corporation (if known) | 77 |
| Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation: | nent Number of Corporation (if known) a Statutes, this <i>Florida Profit Corporation</i> adopts the follo | ي wing amendme |
| A. If amending name, enter the new name of the co | orporation: | |
| | | The new |
| name must be distinguishable and contain the word "cc "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbre | orporation." "company," or "incorporated" or the abbrev " or "Co". A professional corporation name must co eviation "P.A." | riation "Corp.," intain the word |
| B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD | | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO | <u></u> | |
| | | |
| | | |
| D. If amending the registered agent and/or register | | |
| new registered agent and/or the new registered | office address: | |
| Name of New Registered Agent | | |
| | | |
| | (Florida street address) | |
| New Registered Office Address: | , Florida | |
| | (City) | Zip Code) |
| | | |
| New Designation of August Va Cincenting of the union Decare | ii.tomad Anunti | |
| New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent. | I am familiar with and accept the obligations of the positi | ion. |
| | | |
| | | |
| - | other of Man Designment to the West West | |
| Signo | ature 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 | <u>PT</u> | John Doe | |
|-------------------------------|-----------|--|--------------------------|
| X Remove | <u>V</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | DS | DANA GREEN | 7901 4TH ST N STE 5652 |
| Add | | | ST. PETERSBURG, FL 33702 |
| X Remove | | | |
| 2) X Change | PDTS | THOMAS GREEN | 7901 4TH ST N STE 5652 |
| Add | | | ST. PETERSBURG, FL 33702 |
| Remove 3) Change | | man and and a shade and a shad | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | 1984 |
| Add | | | N |
| Remove | | | |
| δ) Change | | | |
| Add | | | |
| Remove | | | |

| | adding additional Articles, il sheets, if necessary). (Be | specific) | | | |
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| The date of each amendment(s) a date this document was signed. | doption: | , if other th | nan the | |
|--|--|-----------------|-------------|-----|
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) | | | |
| | block does not meet the applicable statutory filing requirements, this date will | l not be listed | as the | ; |
| document's effective date on the D | epartment of State's records. | | | |
| Adoption of Amendment(s) | (CHECK ONE) | | | |
| The amendment(s) was/were ad action was not required. | opted by the incorporators, or board of directors without shareholder action and | shareholder | | |
| ☐ The amendment(s) was/were ad by the shareholders was/were s | opted by the shareholders. The number of votes east for the amendment(s) ufficient for approval. | | | |
| must be separately provided for | proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s): t for the amendment(s) was/were sufficient for approval | בארר מייר | 2021 JUN 11 | |
| by | (voting group) | A: 25 | | ŦÌ |
| | (voting group) | SSE | | ; T |
| 06/11/202 Dated | 1 | OF ST | AM 8: | Ċ |
| Signature 77-40 | MAS BREEN | | ဌ္ဌ | |
| (By a c | lirector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary) | — <i>*</i> | | |
| | THOMAS GREEN | | | |
| | (Typed or printed name of person signing) | | | |
| | PDTS | | | |
| | (Title of person signing) | | | |