580104

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SEMICONDUCTO	OR TECHNOLOGY, INC.		
DOCUMENT NUMBER: 580104			
The enclosed Articles of Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this ma	tter to the following:		
M. LANNING FOX			
	Name of Contact Person		
Fox, Wackeen, Dungey, et. a	I.		
	Firm/ Company		
3473 SE Willoughby Blvd			
	Address		
Stuart, FL 34994			
	City/ State and Zip Code		
mkinch@foxwackeen.com			
_	sed for future annual report r	notification)	
`	•	,	
For further information concerning this matter, pleas	se call:		
M. Lanning Fox	at (287-4444	
Name of Contact Person	Area Cod	le & Daytime Telephone Number	
Enclosed is a check for the following amount made	payable to the Florida Depar	rtment of State:	
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division Clifton	Address ment Section n of Corporations Building recutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SEMICONDUCTOR TECHNOLOGY, INC.

	y filed with the Florida Dept. of State)	
880104	-	
(Document Number of	Corporation (if known)	
ursuant to the provisions of section 607.1006, Florida Statutes, this as Articles of Incorporation:	Florida Profit Corporation adopts the fo	lowing amendment
. If amending name, enter the new name of the corporation:		
STI LIQUIDATION, INC.		The new
ame must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "(ord "chartered," "professional association," or the abbreviation ".	Co". A professional corporation name	the abbreviation must contain the
B. Enter new principal office address, if applicable:	6469 SE Baltusrol Terrace	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	Stuart, FL 34997	
C. Enter now mailing address if applicables		TO STATE OF THE ST
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6469 SE Baltusrol Terrace	<u> </u>
	Stuart, FL 34997	
If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address		
new registered agent and/or the new registered office address		
new registered agent and/or the new registered office address		
new registered agent and/or the new registered office address Name of New Registered Agent		

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	<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			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
S) Olas			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:, if other than the 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 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
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 January 25, 2017 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)
FRED G. SEIGEL
(Typed or printed name of person signing)
President
(Title of person signing)

. . .