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5:00	`o:	Division of Corporations Fax Number : (850)617-5380	7		
т. F		Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845	SECITE TARY L	2021 OCT 19	FIL
2021 4 0	iter the annua	email address for this business entity to be used for f I report mailings. Enter only one email address please.*		AH IO:	D
	Email	Address:	TATE ORIDA	ی: ژ	

COR AMND/RESTATE/CORRECT OR O/D RESIGN COVALON TECHNOLOGIES AG LTD. CORP

Certificate of Status	0		
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Help

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	(Pursuant to s. 607.1504, F.S.)		
	SECTION I	2021 (
	F18000003751		רד.
	(Document number of corporation (if known)	9	רי רי רי
1	COVALON TECHNOLOGIES AG LTD. CORP	A	0
י. ז	(Name of corporation as it appears on the records of the Department of State)	2021 OCT 19 AN 10: 5	
	(Incorporated under laws of) (Date authorized to do business in Florida)		•
	SECTION II (+-7 COMPLETE ONLY THE APPLICABLE CHANGES)		
4.	4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? <u>08/02/2021</u>		
5	TIDI AquaGuard Operations Inc.		
	(Name of corporation after the amendment, adding suffix "corporation," "company," or "meorporated," or appropriate abbrev not contained in new name of the corporation)	iation, i	Ĩ
	(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florid	<u>ta)</u>	
e	6. If the amendment changes the period of duration, indicate new period of duration.		
	(New duration)		
7	7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction,		
	(New jurisdiction)		
8.	8. <u>If amending the registered agent and/or registered office address in Florida, enter the name of the</u> <u>new registered agent and/or the new registered office address:</u>		
	Name of New Registered Agent		

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

, Florida_ (Zip Code)

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

Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

:

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9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>1</u>	itle/ Capacity	Name	Address	Type of Action			
				Add			
			<u></u>	Кепюче	:		
				Add			
			<u></u>	Remove	:		
				Add			
		-		JRemove	ť		
_				Add			
		-		Remove			
				Add			
			<u></u>	Remove			
10.	Attached is a c of the application under the laws	ertificate or document of similar import, evide on to the Department of State, by the Secretary of of which it is incorporated.		t more than 90 days of corporate records i	prior to defi in the jurisdi	ivery ction	
		(Signature of a director, a	president or other officer - if in the hand	ls of			
	James Rubrig		appointed fiduciary, by that fiduciary) Vice President, Cl	FO and Secretary			
		Typed or printed name of person signing)	(Title of pers		SELVIL AKY	2021 OCT 19 AN 10: 51	FILED
					E, FLORIDA	AM 10: 51	U D

<u>Delaware</u>

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'COVALON TECHNOLOGIES AG LTD.', FILED A RESTATED CERTIFICATE, CHANGING ITS NAME TO 'TIDI AQUAGUARD OPERATIONS INC.' ON THE SECOND DAY OF AUGUST, A.D. 2021, AT 7:57 O'CLOCK P.M.



Jeffrey W. Bullock, Secretary of State

Authentication: 204449845 Date: 10-19-21

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