

FIS 000004316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

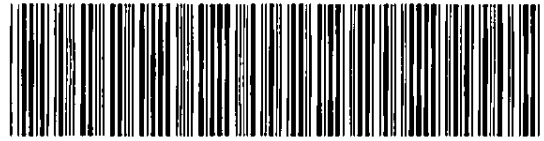
(Document Number)

Certified Copies _____ Certificates of Status _____

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J. HORNE
AUG 15 2024

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2024 AUG -7 PM 4:18
CLERK OF STATE
TAMM

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Explico Inc.

Name of Corporation

DOCUMENT NUMBER: F18000004316

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jennifer Anderson

Name of Contact Person

Explico Inc.

Firm/Company

40028 Grand River Ave. Ste. 300

Address

Novi, MI 48375

City/State and Zip Code

janderson@explico.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jennifer Anderson

Name of Contact Person

at (248) 731-5197

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$52.50 Filing Fee,
Certificate of Status &
Certified Copy |
|---|--|---|---|

Mailing Address:

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

Street Address:

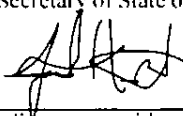
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED
2024 AUG -7 PM 4:16
CLERK OF DISTRICT COURT
STATE OF FLORIDA

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

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Justin Holderness

Co-CEO

(Typed or printed name of person signing)

(Title of person signing)

FILING FEE \$35.00

LARA Corporations
Online Filing System
Department of Licensing and Regulatory Affairs

Form Revision Date 07/2016

CERTIFICATE OF AMENDMENT TO THE ARTICLES OF INCORPORATION
For use by DOMESTIC PROFIT CORPORATION

Pursuant to the provisions of Act 284, Public Acts of 1972, the undersigned corporation executes the following Certificate:

The identification number assigned by the Bureau is:

800758007

The name of the corporation is:

EXPLICO ENGINEERING CO.

The Articles of Incorporation is hereby amended to read as follows:

Article I

The name of the corporation as amended, is:

EXPLICO INC.

2. The foregoing amendment to the Articles of Incorporation proposed by the board was duly adopted on: 05/18/2022 by the

written consent of the shareholders that have at least the minimum number of votes required by statute in accordance with Section 407 (1) of the Act. Written notice to shareholders that have not consented in writing has been given.

(Note : Written consent by less than all of the shareholders is permitted only if such provision appears in the Articles of Incorporation.)

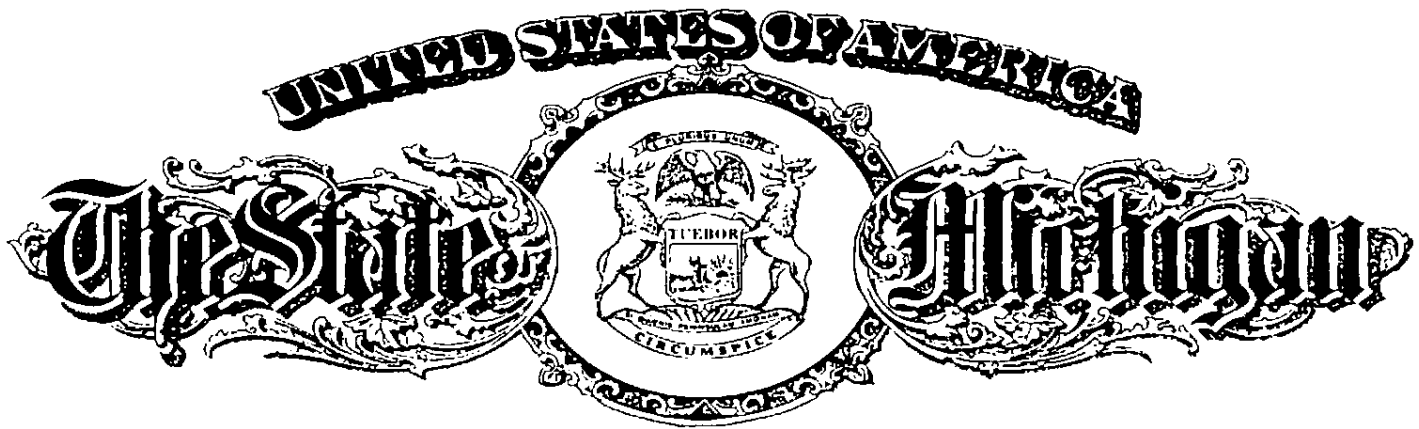
This document must be signed by an authorized officer or agent:

Signed this 6th Day of July, 2022 by:

Signature	Title	Title if "Other" was selected
Gary E. Perlmutter, Esq.	Authorized Agent	

By selecting ACCEPT, I hereby acknowledge that this electronic document is being signed in accordance with the Act. I further certify that to the best of my knowledge the information provided is true, accurate, and in compliance with the Act.

Decline Accept



Department of Licensing and Regulatory Affairs
Lansing, Michigan

This is to Certify that the annexed copy has been compared by me with the record on file in this Department and that the same is a true copy thereof.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by electronic transmission

Certificate Number: 24060473501

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 21st day of June, 2024.

Linda Clegg

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau