H08531

(Re	equestor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Do	ocument Number)	. <u>.</u>		
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

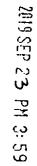
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September 11, 2019

NANCY COOL TECHTROL SYSTEMS, INC. 5260 HYLAND HILLS AVE #1624 SARASOTA, FL 34241

SUBJECT: TECHTROL SYSTEMS, INC.

Ref. Number: H08531

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PAGE 4 OF 4 MUST BE FULLY COMPLETED IN ORDER TO FILE THE AMENDMENT. PLEASE RESUBMIT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 319A00018748

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July 19, 2019

NANCY COOL TECHTROL 7756 CASTLEISLAND DR SARASOTA, FL 34240

SUBJECT: TECHTROL SYSTEMS, INC.

Ref. Number: H08531

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 419A00014694

COVER LETTER

TO: Amendment Section Division of Corporations	
name of corporation: Fishers! DOCUMENT NUMBER: HO 85	systems, INC
DOCUMENT NUMBER:	5'31
The enclosed Articles of Amendment and fee are subn	nitted for filing.
Please return all correspondence concerning this matte	r to the following:
NANCY C	300 L
Techtrul Sy	Name of Contact Person Strus, In c Firm/ Company Address Firm/ Address
	Firm/ Company
_ 5260 Hyla.	1 Hills Ave # 1624
SANUSOTA	FL 34241 City/ State and Zip Code
	City/ State and Zip Code
	- Everizon net
	I for future annual report notification)
For further information concerning this matter, please	call:
NANCY COOL	at (941) 224 - 8911 Area Code & Daytime Telephone Number
Same of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made page	yable to the Florida Department of State: Alleady SuBritter
☐ \$35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
rananassee, f.L. 32314	Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Cor	poration as currently f	iled with the Florida D	ept. of State)		
Technol systems	Inc.	408531			
(Document Number of C	orporation (if known)			
rsuant to the provisions of section 607.1006, Articles of Incorporation:	Florida Statutes, this Flo	orida Profit Corporation	r adopts the followi	ng amendme	ent(s) to
If amending name, enter the new name of	the corporation:				
				The _new	
me must be distinguishable and contain th lorp.," "Inc.," or Co.," or the designation ord "chartered," "professional association,"	"Corp," "Inc," or "Co or the abbreviation "P.	". A professional corp	poration name must	t contain the	ı
Enter new principal office address, if applerincipal office address MUST BE A STREE	<u>licable:</u> TADDRESS)	5260 My SARUSSITE	yland List	11 AV-C 74/	H-16.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u> </u>	SAME.		2919 SEP	7
If amending the registered agent and/or r new registered agent and/or the new regis	egistered office addres stered office address:	s in Florida, enter the 1	name of the	23 PH 3	
Name of New Registered Agent	hais Cool	<u></u>	c is:		
<u>39</u>	stered office address: ALIS Cool y London d (Florida street	em Unive	. SANGESTE	J.FL.	34240
New Registered Office Address:		(ty)	, Florida	r Code)	
w Registered Agent's Signature, if changing ereby accept the appointment as registered a		h and accept the obligat	ions of the position.		
	\triangle				
		in the state of th		_	
	igent. I am familiar wit	h and accept the obligat		_	

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.

Mike Jones, V as Kem	ove, and Sally Smi	in, SV as an Ada.	
Example: X Change	<u>PT</u> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	: Jones	
X Add	<u>SV</u> <u>Sally</u>	· Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	PD	Gent Cool	JAMG. L. FL 34240
Add		(Decoured)	SAMG. L. FL 34240
Remove			
2) Change	<u> </u>	Chas Cook	394 London ling du
Add			SARMS STRIKE L
Remove	\)	2. A LATSON	-camp. 110 313 COLVIIBO CREC
3) Change	_V_	Blund WAR	ORIANDO FL
Remove			32804
4) X Change	non ST	NANCY COOL	5260 Hyland Hills A
Add	TOPT		# /162 4
Remove	P'		SHIZUSOTA, FL 34241
5) Change			
Add			
Remove			
6) Change			
Add			
Damara			

If amending or adding addi (Attach additional sheets, if n	ecessary). (Be sp	ecific)	<u></u> .		
·					
		-		,	
·					
					
				· · · · · · · · · · · · · · · · · · ·	·
If an amendment provides to provisions for implementing (if not applicable, indicable)	ig the amendment	eclassification, o if not contained	r cancellation of in the amendme	issued shares, nt itself:	
	.				-
			-		
					·

The date of each amendment(s) adoption: <u>JULY 23, 19</u> date this document was signed.	, if other than the
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 document's effective date on the Department of State's records.	will not be listed as the
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)	
(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.	
Dated9/18/19	
Dated9/18/19 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)	
MANCY L. COO L. (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
PRESIDENT (Title of person signing)	
(Title of person signing)	