## H33436

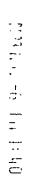
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	Alken	Imagion	Inc.	
DOCUMENT NUMBER:	H334	36		
The enclosed Articles of Amendme	nt and fee are subr	nitted for filing.		
Please return all correspondence co	ncerning this matte	er to the following:		
_Ch	ristina	Name of Contact Person		
AIV	W Wr	raution, J	MC.	
PO	Pox ?	210306 Address		
Raya	J Palm	City/ State and Zip Code	1 33421	
		FON @ QOL. C		
For further information concerning	this matter, please	call:		
Christina W		at (501)	de & Daytime Telephone Number	<del>,</del>
Enclosed is a check for the following				
	75 Filing Fee & Teatus	□\$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 Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion orations	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	

## **Articles of Amendment** to Articles of Incorporation

of

Alvon Trigation Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)
H33430
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association." or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent Geraldine Walczak
110104 Orange Grove Blod.
New Registered Office Address: West Palm Beach, Florida 33411 (City) (Zip Code):
New Registered Agent's Signature, if changing Registered Agent:
Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing
Signature of New Negistered 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)

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	PT John	<u>Doe</u>		
X Remove	<u>V</u> <u>Mike</u>	Jones		
X Add	<u>SV</u> <u>Saily</u>	Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	P,	Christopher	Walczak- 1100	+ Orang Cone BI
Add			West Malm	Beach, fc 3341
Remove 2) Add	VP	Geraldine 1	Nalizat 11Day Orang West Falm	yl Grove Blod. Beach, fi 33411
Remove Change	T, S	Christina W	•	ange Coure Blod. Beach K 33411
Remove 4) Change Add				1
Remove 5) Change Add				<del></del> 5
Remove				
Add Remove				<del> </del>

amending or adding additional Articles, enter change(s) here: tach additional sheets, if necessary). (Be specific)		
		_
	<u></u>	
	<del></del> .	
<del></del>		
The state of the s		
the few and analysis and an appellation of issued charge		
an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:		
(if not applicable, indicate N/A)		
	<u>:</u>	
	- : <del>-</del>	

The date of each amendment(s) adoption:	, 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 will document's effective date on the Department of State's records.	ll not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	d shareholder
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)	
(voling group)	
- Dated $8-31-23$	
Signature Desalution Walcowek	. n : : -
(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)	₫.
	-
Geraldine Walczak	
(Typed or printed name of person signing)	
VP	0
(Title of person signing)	<del></del>