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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: SUNSHINE FILTERS OF PINELLAS, Inc. DOCUMENT NUMBER: 4-89422				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
TOSEPH N. PERLMAN ESQ Name of Contact Person TOSEPH N. PERLMAN LAW FIRM Firm/ Company Z8461 US Hwy 19 N Address Cleary TER FL 33761 City/ State and Zip Code JOE@ DERLMAN LAW FIRM. COR E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Toseph N. Perlman at (727) 536-2711 Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallabassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

(Name of Corporation as currently filed with the Florida Dept. of State) 29-24-64-72 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation 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.," "the.," 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, MAT BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAT BE A POST OFFICE BOX) D. If amending the registered agent and/or the new 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 Vision Vis	Surchase follow y Preller Inc
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(City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:	LA140 S3773
New Registered Agent's Signature, if changing Registered Agent:	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	(Siny)
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Signature of New Registered Agent, if changing	Signature of New Registered 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)

Example:

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 Doc 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.

X Change	<u>PT</u> <u>Jo</u>	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One) 1) Change Add	Title PV	Name Michael Terpstra	12415 73rdct. (Hyc 45373
Remove 2) Change Add	<u>P</u>		it 12415 73 MC1 Ltipo f13377
Remove 3) Remove Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	
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(f an amandament provides for on or o	nange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	and the contained in the Emilian Contained in the Contain	
(9 2//		

The date of each amendment(s) a	doption:	, if other than th
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 bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, the partment of State's records.	is date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adduction was not required.	opted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes east for the amendarifficient for approval.	nent(s)
	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	itement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
DatedSignature	9/15/2021. myss//ell	
(By a d selecte	irector, president or other officer – if directors or officers have not be d, by an incorporator – if in the hands of a receiver, trustee, or other ted fiduciary by that fiduciary)	
	Toseph. N Personsigning)	
	(Typed or printed name of person signing)	
	atterne factionis	_
	(Title of person signing)	