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COVER LETTER
TO: Amendment Section Division of Corporations
NAME OF CORPORATION: <u>Solarmates Corp</u> DOCUMENT NUMBER: <u>NIBODODO 7366</u>
DOCUMENT NUMBER: <u>N 1800000 7366</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
(Firm/ Company)
ATT 740 HM ST Alata Ste 181 (Address)
St. Petersburg FL 33701 (City/ State and Zip Code)
(City/ State and Zip Code) 5.4EVC D Sun (mks. Org E-mail address: to be used for future annual report notification)
For further information concerning this matter, please call:
Stephen Wiseman at <u>305-44017014</u> (Name of Contact Person) at (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee □S43.75 Filing Fee & □S43.75 Filing Fee & Certificate of Status Certified Copy

(Additional copy is enclosed)

□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

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

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

Articles of An to Articles of Inco of	-02.3F	EB 24 AM 10: 02
(Name of Corporation as currently filed with the Florida Dept. of <u>Solarinates Con</u> (Document Sumber of Co	180000	0 7366

Pursuant to the provisions of section 617,1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

SanLinks Fur	1ding Inc, The new
name must be distinguishable and contain the word "corporation	ion" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co," may not be used in the name.	
B. Enter new principal office address, if applicable:	740 Ist St. Mist Ste 181
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	St. Petersburg FL 3370
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	1401ST ST Nontre ISI
-	St. Petersburg FL 33701
	<u> </u>
D. If amending the registered agent and/or registered offic	
new registered agent and/or the new registered office a	ddress:
Name of New Registered Agent:	
Mary Designary Office Address	(Florida street address)
<u>New Registered Office Address</u> :	
	171 saide

(City)

hiorida (Zip Code) S

<u>New Registered Agent's Signature, if changing Registered Agent:</u> Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add		<u> </u>	
Remove			· · · · · ·
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or add	ling additional A	rticles, enter change(s) here:	

(attach additional sheets, if necessary). (Be specific)

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The date of each amendment(s) adoption:					, if other than the
date this document was signed.					
terrando da ser de anna linna tara					•
Effective date <u>if applicable</u> :	nore than 90 d	avs after am	endment file de	ite)	
• •					ill not by licture as the

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

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(<u>CHECK ONE</u>)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 1senan Signature (By the chairman or vice chairman of the board, president or other officer-if directors

By the chairman of vice chairman of the board, president of other officer-fi directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

tephen K Wiseman (Typed or printed name of person signing)

<u>Chief Operature Officer</u> (Title of person signing)