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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: WARREN EQUIPMENT, INC
DOCUMENT NUMBER: P010000 75 244
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DUANE CHAMBERS Name of Contact Person WARREN EQUIPMENT, INC Firm/ Company
Name of Contact Person
WARREN FOURMENT INC
Firm/ Company
2299 Harry 92 E.
Address
PLANT CITY, FL. 33563 City/ State and Zip Code
City/State and Zin Code
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
DUANE CHAMBERS at 813 , 724-3014 8 8
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:
City/ State and Zip Code DCHAMBERS & WARRENTRAILERS. COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DUANE CHAMBERS Name of Contact Person Area Code & Daytime Telephone Number Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee Certificate of Status Certificate Copy (Additional Copy is enclosed) (Additional Copy is enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations

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

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

Articles of Amendment to Articles of Incorporation of

	01				
WARREN EQUIPMENT,	, 120				
	oration as currently fi	iled with the Florida	Dept. of State)		
P01000075244					_
(Do	ocument Number of Co	orporation (if known)		
Pursuant to the provisions of section 607.1006, Flots Articles of Incorporation:	orida Statutes, this <i>Flo</i>	orida Profit Corporat	tion adopts the follo	owing amendme	ent(s) to
A. If amending name, enter the new name of the	he corporation:				
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," " "chartered," "professional association," or the a	Inc," or "Co". A p	npany, " or "incorpor rofessional corporat	ated" or the abbre tion name must co	The new viation "Corp., ontain the word	
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET).					
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE</u>	<u>: BOX</u>) -				
D. If amending the registered agent and/or reg new registered agent and/or the new registe		s in Florida, enter tl	ne name of the		
Name of New Registered Agent					
	(Florida street	address)		2023 A SECF TA	,
New Registered Office Address:	(Ci	(טְיַ)	, Florida		3 00 PH
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		and accept the obliq	gations of the posit	EE, FL	PH 1: 07

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)

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	<u>PT</u> <u>Joh</u>	n Doc	
X Remove	<u>V Mil</u>	ce Jones	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	Title	Name	Address
1) Change		ROBERT FLAVIN	118 BISCAYNE AVE.
\nearrow Add			TAMPA FL 33606
Remove			
2) Change		CALLA WARREN FLAVIL	118 BISCAYNE AVE.
X Add			TAMPA, FL 33606
Remove Change			
Add			
Remove			
4) Change			
Add			<u></u>
Remove			SECINI TAIL
5) Change			APR 28
Add			್ ∵ಿ ಕ
Remove			PA 1: 0
6) Change	-		TATE FL
Add			
Remove			

The date of each amendment(s) adopti- date this document was signed.	on: 4/26/2023	, if other than the
_	4/2/12/22	
Effective date <u>if applicable</u> :	4/26/2023 (no more than 90 days after amendment file of	late)
Note: If the date inserted in this block document's effective date on the Department.	does not meet the applicable statutory filing requirement of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without sha	archolder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes east for the int for approval.	e amendment(s)
• •	d by the shareholders through voting groups. The foll voting group entitled to vote separately on the amend	7.7
"The number of votes east for th	e amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voiing group)	
Dated4/26	/2023	
Dated $4/26$ Signature 26	and le lun	
(By a directo	r, president or other officer – if directors or officers han incorporator – if in the hands of a receiver, trustee	
	duciary by that fiduciary)	, or other court
Z	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
•	VICE PRESIDENT	
	(Title of person signing)	

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