P010000 81863

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OIVISION OF CORPORATION

NC

MAY 2 2 2013

T. BROWN

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Interpolymer Solutions, Inc P01000081863 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jesse Pasternak Name of Contact Person Interpolymer Solutions, Inc. Firm/ Company 1195 Larchmont Dr. Address Englewood, FI 34223 City/ State and Zip Code jtpvr6@comcast.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (941) 468-4891
Area Code & Daytime Telephone Number Jesse Pasternak Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee **□\$43.75** Filing Fee & □\$43.75 Filing Fee & ■\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Interpolymer Solutions, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P01000081863 (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: Polyconix Corp. 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 (Florida street address) New Registered Office Address: Florida (City) (Zip Code) 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.

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: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
Kemove			
5) Change		_	
Add			
Remove			
0 0			
6) Change			
Add			
Remove			

	ding or adding additional additional additional sheets, if necessa	ıry). (Be specifi	c)		
				· · · · · · · · · · · · · · · · · · ·	
			 		
f an an	nendment provides for an	exchange, reclas	sification, or can ot contained in th	cellation of issued e amendment itse	<u>shares.</u> If:
provisi	ions for implementing the	14)			
provisi	ions for implementing the not applicable, indicate N/	(A)			
provisi	ions for implementing the not applicable, indicate N/.	(A)		,,	
provisi	ions for implementing the not applicable, indicate N/.	(A)			
provisi	ions for implementing the not applicable, indicate N/.	(A)			
provisi	ions for implementing the not applicable, indicate N/.	(A)			
provisi	ions for implementing the not applicable, indicate N/.	(A)			

The date of each amendment	t(s) adoption: 5/16/2013
Effective date if applicable:	5/16/2013
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated <u>5/1</u>	6/2013
Se	By a director, president or other officer—if directors or officers have not been elected, by an incorporator—if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)
	Jesse Pasternak
	(Typed or printed name of person signing)
	Director
	(Title of person signing)