# P02000028852

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### COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Electrotrader, Inc. DOCUMENT NUMBER: P02000028852 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: EDUARDO J. BOGGIANO Name of Contact Person ELECTROTRADER, INC. Firm/ Company 10197 CAMELBACK LANE Address BOCA RATON, FLORIDA 33498 City/ State and Zip Code ed\_boggiano@bellsouth.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ED J. BOGGIANO at (561 ) 310-4912

Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & ☐S43.75 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 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

Electrotrader, Inc.			
	ntion as currently filed with the	Florida Dept. of State)	
P02000028852			
(Docu	ument Number of Corporation (i	f known)	
Pursuant to the provisions of section 607.1006, Florie its Articles of Incorporation:	da Statutes, this <i>Florida Profit</i> (	Corporation adopts the foll	owing amendment(s) to
A. If amending name, enter the new name of the	corporation:		
name must he distinguishable and contain the word "a "Inc.," or Co.," or the designation "Corp," "Inc "chartered." "professional association," or the abbi	" or "Co" A professional	ncorporated" or the abbre corporation name must co	The new viation "Corp.," ontain the word
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)	ole: ODRESS )		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u> C	(OX)		2021 13
D. If amending the registered agent and/or registe	ered office address in Florida,	2. V	
new registered agent and/or the new registered  Name of New Registered Agent	d office address:		ယ ဟ
	(Florida street address)		
New Registered Office Address:		Elopido	
	(City)	, Florida	(Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	e <mark>gistered Agent:</mark> I am familiar with and accept t	he obligations of the positi	ion.
Sign	nature of New Registered Agent.	if changing	<del></del>

Check if applicable

 $\Box$  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>	John Doe	
X Remove	$\underline{\mathbf{V}}$	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	<u>V</u>	EDUARDO J. BOGGIANO	10197 CAMELBACK LANE
XAdd			BOCA RATON, FL 33498
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
		_
		<del></del>
		-
an amendment provides for an excha	nange, reclassification, or cancellation of issued shares,	
argament intermediate the amen	endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
	<del></del>	

.

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
_	/14/2021	
	(no more than 90 days after amendment file date)	_
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sharehold	ler action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amen sufficient for approval.	idment(s)
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendment(	statement s):
"The number of votes ca by FRABEL P. BOGGI	st for the amendment(s) was/were sufficient for approval ANO, PRESIDENT	
07/14/20] Dated Signature (17) a She appor	The corporation of the first of the first or officers have not on by an incorporator – if in the hands of a receiver, trustee, or off need fiduciary by that fiduciary)  FRABEL P BOGGIANO  (Typed or printed name of person signing)  PRESIDENT	
	(Title of person signing)	