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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: BUILDTECH GR	OUP INC			
DOCUMENT NUMB	ER: P03000122649				
The enclosed Articles of	f Amendment and fee are su	ibmitted for filing.			
Please return all corresp	oondence concerning this ma	tter to the following:			
;	MOHIEDDIAN ZARIF				
-		Name of Contact Persor	11		
1	BUILDTECH GROUP INC				
<u>-</u>		Simil Company			
	5200 LA GORCE DRIVE	Firm/ Company			
-	Address				
i	MIAMI BEACH, FLORIDA	33140			
_		City/ State and Zip Cod	e		
MOZA	ARIF@BUILDTECHGROU	P.COM	/		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
MOHIEDDIAN ZARI	ŀ	786	229-2751		
Name o	Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 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		Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

BUILDTECH GROUP INC.			
(Name of Cor	poration as curre	ntly filed with the Florida Dept.	of State)
P030000122649			
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, its Articles of Incorporation;	Florida Statutes, th	is <i>Florida Profit Corporation</i> add	pts the following amendment(s) to
A. If amending name, enter the new name of	the corporation:		
N/A			The new
name must be distinguishable and contain th "Corp.," "Inc.," or Co.," or the designation word "chartered." "professional association,"	"Corp," "Inc." or	· "Co". A professional corporat	ated" or the abbreviation
D. Patana and adjusted office address if and	المسالم	N/A	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			<u> </u>
			1923
			9
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		N/A	1 2 1
(Stuffing duaress MAT DE ATOST OFFIC	. <u>L. DO.N</u>)		PH 2:
			E 2
			
D. If amending the registered agent and/or renew registered agent and/or the new registered.			<u>: of the</u>
N/A	acted office addition		
Name of New Registered Agent			
	(Florida	street address)	
New Registered Office Address:			Florida
New Meganerea Control Address.		(City)	(Zip Code)
New Registered Agent's Signature, if changing			
I hereby accept the appointment as registered a	gent. – Lam familia	ir with and accept the obligations	of the position.
	Signature of Nov	Registered Agent, if changing	
	- organizate of new	- теданетси лідені, <i>ў спан</i> діну —	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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 = Chie Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each offic 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: XChange	<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	TD	SAMIHE D. ZARIF	118 NW 24 STREET.
XX Add			STUDIO 8
Remove			MIAMI, FLORIDA 33127
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

F <u>II ame</u> (Attach	additional sheets, if necessary). (Be specific) Additional sheets, if necessary). (Be specific)
	· · · · · · · · · · · · · · · · · · ·
 ·	
<u>provi</u> (1	mendment provides for an exchange, reclassification, or cancellation of issued shares, sions for implementing the amendment if not contained in the amendment itself: f not applicable, indicate N/A) A A
_	

The date of each amendment(s)	adoption:	, if other than th
date this document was signed.		
ر Effective date <u>if applicable:</u>	ULY 10, 2019	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	rt
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	Ţ"	
·	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
action was not required.		
JUNY 1 Dated	0. 2019	
Ç: .	\f-\f-\f-\f-\f-\f-\f-\f-\f-\f-\f-\f-\f-\	
selec	director, president or other officer – if directors or officers have not been ctea, by an incorporator – if in the hands of a receiver, trustee, or other court offitted fiduciary by that fiduciary)	
	MOHIEDDIAN ZARIF	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	