P04000162557

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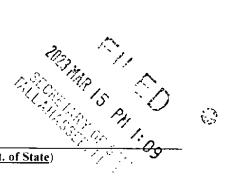
TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Equipment Plus So	olutions, Inc.		
DOCUMENT NUMBER: P04000162557				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Joanne M. Hickey, Vice Pres	ident		
	<u></u>	Name of Contact Person	-	
	Equipment Plus Solutions, In	c.		
		Firm/ Company	-	
	PO Box 2908			
		Address	·	
	Belleview, FL 34421-2908			
		City/ State and Zip Code		
	Joanne.Hickey@EquipmentP	lusInc.com		
	E-mail address: (to be us	ed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
Joanne M. Hickey		at (237.1869	
Name o	of Contact Person	Area Coc	le & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	rtment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & 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

Street Address
Amendment Section Division of Corporations The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation of



Equipment Plus Solutions, Inc.

filed with the Florida Dept. of State) Corporation (if known) Iorida Profit Corporation adopts the follo	
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	wing amendment(s)
mpany," or "incorporated" or the abbrev professional corporation name must co	The new iation "Corp.," ntain the word
N/A	
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N/A	
ss in Florida, enter the name of the	
t address)	
20 1. 1 1	
	Zip Code)
•	
	N/A ss in Florida, enter the name of the address) Florida

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)

Add

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	
I) Change	D	Michael J.W. Hickey	1128 17th Avenue North	
X Add			St. Petersburg, FL 33704	
Remove				
2) Change	D	Sean G. Hickey	147 Sisson Avenue NE	
X Add			Atlanta, GA 30317	
Remove 3) Change				
Add				
Remove			<u>_</u>	
4) Change		_		
Add				
Remove				
51 Change				
Add				
Remove				
б) Change				

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate NA)	N/A	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate NA)		-
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provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate NA)		
(if not applicable, indicate N/A)	F. If an amendment provides for an exchange, reclassification, or cancell	ation of issued shares.
N/A	(if not applicable, indicate NA)	mendment itsell:
	N/A	
······································		<u></u>

The date of each amendment(s) date this document was signed.	adoption: if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
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 shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	rvoring group)
March 8 Dated	2.2023
Signature	director, president or other officer - if directors or officers have not been
select	ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	Joanne M. Hickey
	(Typed or printed name of person signing)
	Vice President
	(Title of person signing)