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R. WHITE NOV 15 2018 2018 NOV -7 PH 12: 14
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: CRIPTON CORP			
DOCUMENT NUME	D0.5000006656			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.		
Please return all corres	pondence concerning this ma	itter to the following:		
	WILFREDO MORENO			
		Name of Contact Person	n	
	CRIPTON CORP			
		Firm/ Company		
	1791 NW 18 TER APT #1			
		Address		
	MIAMI, FL 33125			
		City/ State and Zip Cod	e	
	E-mail address: (to be under concerning this matter, please		notification)	
WILFREDO MORENO		786 at (247-3586	
Name o	of Contact Person	at (786) 247-3586 Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
S35 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)	
Ame Divis P.O.	ing Address Indment Section Island of Corporations Box 6327 Island of Fig. 32314	Amend Divisio Clifton	Address ment Section of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

CRIPTON CORP	2018 NOV -7 PM 12: 11
(Name of Corporatio	n as currently filed with the Florida Dept. of State) PM 12: 14
P05000006656	TALL AND STATE
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration:
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp.," word "chartered," "professional association," or the a	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the bbreviation "P,4."
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDI	YESS)
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u> </u>
D. If amending the registered agent and/or registere new registered agent and/or the new registered o	d office address in Florida, enter the name of the ffice address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Florida
New Negistered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Regis	
i nervoy accept the appointment as registered agent. T	am familiar with and accept the obligations of the position.
Signa	ture 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	\underline{V}	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
I) Change	VP	KEVIN W. MORENO	1791 NW 18 TER APT #1
X Add			MIAMI, FL 33125
Remove			
2) Change	_ D	OMAR ANTONIO PENA	1791 NW 18 TER APT #1
X Add			MIAMI, FL 33125
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			<u> </u>
Add			
Remove			
6) Change			
Add			
Remove			

irmaen aaaaa	or adding addition and sheets, if nece	ussarv). (Be	specific)	sinere.			
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lf an amendm	ent provides for	an exchange,	reclassificati	on, or cancell	ation of issuec	i shares.	
provisions fo	r implementing t	he amendmei	nt if not cont	ained in the ar	nendment itse	<u>:1f:</u>	
(if not ap	plicable, indicate	N/A)					
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	09/18/18	
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
09/1	8/18	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date wipartment of State's records.	II not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
☐ The amendment(s) was/were approvided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopaction was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopaction was not required.	pted by the incorporators without shareholder action and shareholder	
09/18/18		
Dated		
(x) at		
Signature (1902 di	rector, president or other officer – if directors or officers have not been	
	by an incorporator – if in the hands of a receiver, trustee, or other court	
	ed fiduciary by that fiduciary)	
	WILFREDO MORENO	
-	(Typed or printed name of person signing)	
	PRESIDENT	
-	(Title of person signing)	