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Mary

COVER LETTER AUG 06 2018 TO: Amendment Section Division of Corporations CINCINNAT NAME OF CORPORATION: DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Firm/ Company INTERNAL REVENUE SERVICE City/ State and Zip Code AUG 06 2018 E-mail address: (to be used for future annual report notification) SERVICE CENTER DIRECTOR COVINGTON, KY MAIL UNIT # 376 For further information concerning this matter, please call: Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State:

□\$43.75 Filing Fee &

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Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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Certificate of Status

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Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

□\$52.50 Filing Fee

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Articles of Amendment

to

Articles of Incorporation

KOOHO WeldING COTTP. (Name of Corporation as currently f)	ed with the Florida Dept. of State)
POGROO 109878	,
(Document Number of Co	prporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	rida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co word "chartered," "professional association," or the abbreviation "P.A	". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	<u> </u>
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	1/2 = 5 7
	NA
·	/ 3 3 0
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	· · · · · ·
	ä
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-	
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	n/A-
(Florida street d	
New Registered Office Address:(Cit	y) (Zip Code)
(1.11	y vzip 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.
	N/D
Signature of New Regi.	stered 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 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.

Mike Jones, V as Remove Example:	, and Sali	ly Smith, SV as an Add.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name /	Address
1) Change	<u> </u>	KAUL GOUZAKEZ	3015 SW 106 AUE
X Add			Miani FL 33/15
Remove		≤ 1.001	
2) Change	31.	Kodolfo GONZAKEZ	3015 SW 106 AVE
_X Add		KUIZ	MAMI FC
Remove			33165
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ich additional she	ets, if necessary). (1	s, enter change(s) hero Be specific)			
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n amendment pr	ovides for an exchan	ge, reclassification, or	cancellation of issu	ied shares,	
visions for impl	ementing the amendr le, indicate N/A)	ment if not contained i	<u>n the amendment i</u>	tself:	
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The date of each amendment(s) ad	loption:	MA		_, if other than th
date this document was signed.				
Effective date if applicables		N/A		
Effective date <u>if applicable</u> :	(no more th	han 9 0 days after amendment f.	ile date)	 -
Note: If the date inserted in this bl document's effective date on the Dep			sirements, this date will	not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
☐ The amendment(s) was/were adop by the shareholders was/were suf		. The number of votes cast for	the amendment(s)	
☐ The amendment(s) was/were appropriately provided for	•		~ .	
"The number of votes east f	for the amendment(s) was	s/were sufficient for approval		
by			14	
,	(voting group)			
The amendment(s) was/were ado action was not required.	pted by the board of direc	ctors without shareholder action	on and shareholder	
☐ The amendment(s) was/were adopaction was not required.	pted by the incorporators	s without shareholder action an	d shareholder	
Dated	7/31/18	<u> </u>		
Signature				
		r officer – if directors or officer		
	l, by an incorporator – if ed fiduciary by that fiduc	`in the hands of a receiver, trus ciary)	tee, or other court	
	Ropolfo	GONZALEZ.		
•	(Typed or prir	inted name of person signing)		
	9.	PRESIDENT		
-	T)	Title of person signing)		