## P08 000061462

	<u> </u>	
(Req	uestor's Name)	
(Add	ress)	<del></del>
(Add	racs)	
(Audi	e33)	
(City)	State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Na	me)
(Doc	ument Number)	)
Certified Copies	Certificate	s of Status
<u> </u>		·
Special Instructions to F	iling Officer:	
		V/C





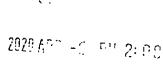
000341177700

03/02/20--01026--015 \*\*35.00

ACCRETARY OF STAFF A







Letter Number: 020A00005884

## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 18, 2020

LAURIE WESLEY 2462 EMERSON AVE S. ST. PETERSBURG, FL 33712

SUBJECT: SURFACE ENGINEERING AND ALLOY POWDERS, INC.

Ref. Number: P08000061462

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	JURFACE EN	GINEERING 1	AND Alloy	POWDERS, INC.
DOCUMENT NUMBER:				
The enclosed Articles of Amendme	ent and fee are submitte	d for filing.		
Please return all correspondence co	ncerning this matter to	the following:		
Sur 	eface Eng 1895 46th r. Petelspul	INFELIAL Firm/ Company  ADE N.  Address  1 FL 337  State and Zip Code	114 net	<u>XELS</u> , INC.
For further information concerning	this matter, please call			
Laurie WES Name of Contact Pe	erson	at (Area Code	528 - 3734 & Daytime Telephone	Ext.114 Number
Enclosed is a check for the following	ng amount made payab	e to the Florida Depart	ment of State:	
•	icate of Status C (A	43.75 Filing Fee & ertified Copy dditional copy is nelosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section of Corporation of Corporation (P.O. Box 6327)	ion	Division	ddress ent Section of Corporations atre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

of

Sulface Engineeling Allow (Name of Corporation as currently f	POWDERS, INC.	
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fla</i> its Articles of Incorporation:	orida Profit Corporation adopts 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 the word "corporation," "cor "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A particle of the contact	npany," or "incorporated" or the abbreviation professional corporation name must contain	n "Corp.," the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	ula	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	_n a	SLORE JARY OF THE BOTH OF CHEET ARY OF THE BOTH OF CHEET ARY OF THE BOTH OF CHEET ARE
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	2: 06
Name of New Registered Agent Laurie Wes  2895 4646  (Florida street)	AUE N.	
New Registered Office Address: ST. PETERS.BU	Plorida 337 (Zip C	ode)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wit  Signature of New Registered agent.	h and accept the obligations of the position. istered Agent, if changing	

Check if applicable

 $\square$  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)

Example:

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.

	X Change	<del>loc</del>	
Type of Action (Check One)         Title         Name         Address           (Check One)         S         STEPHANIE POST         15401           Add         Add         Change	X Remove	<u>ones</u>	
(Check One)       STEPHANIE POST       15401         1) Change       Add       Change         Add       Change       Change         Add       Add       Add         Add       Add       Add         Remove       Add       Add         Add       Add       Add         Add       Add       Add         Remove       Add       Add         Add       Add       Add         Remove       Add       Add         Add       Add       Add         Remove       Add       Add         Add       Add	X Add	<u>mith</u>	
2) Change S Laulie Nester 10770  Add	(Check One)  1) Change		
	2) Change	Laurie Wesley 10770 US Huy 1 Pinellos Park, Fi	
4) Change			
5) Change Add	4) Change	_v/s	
6) Change	5) Change	_v/a	
Remove	6) Change Add	_N 2	<u>-</u>

n adamonai sheets, if i	necessary). (Be specific)			
nla				
		<u> </u>		
<del></del> ·-				
			<del></del> _	
	•			
	·			
			·	
			·····	
		•		
amendment provides	for an exchange, reclassi	fication, or cancellat	ion of issued shares,	
isions for implement if not applicable, indi	ing the amendment if not icate N/A)	comained in the ann	engiment usen.	
$n \mid a$	·			
•				
		· ·	·	
				<del></del>
			·	
		-		

•

1000

The date of each amendment(s) adoption: _	2/27/20	20	, if other than the
date this document was signed.			
Effective date <u>if applicable</u> :	1127 1031	) 0 days after amendment	tile date)
Note: If the date inserted in this block does i			
document's effective date on the Department of		acre statutory rining tes	quite money and and an income and an income
Adoption of Amendment(s) (Cl	HECK ONE)		
☑ The amendment(s) was/were adopted by the action was not required.  ☐ The amendment(s) was/were adopted by the action was not required.  ☐ The amendment(s) was/were adopted by the action was not required.  ☐ The amendment(s) was/were adopted by the action was not required.  ☐ The amendment(s) was/were adopted by the action was not required.  ☐ The amendment(s) was/were adopted by the action was not required.  ☐ The amendment(s) was/were adopted by the action was not required.  ☐ The amendment(s) was/were adopted by the action was not required.  ☐ The amendment(s) was/were adopted by the action was not required.  ☐ The actio	e incorporators, or	board of directors witho	ut shareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		e number of votes east f	or the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	he shareholders thr g group entitled to	ough voting groups. The vote separately on the c	e following statement imendment(s):
"The number of votes cast for the amo	endment(s) was/we	re sufficient for approve	al
by INCOLPORATOLS			**
(Ve	ting group)		
Dated 4/1/2020	$\mathcal{A}_{I}$		
<del></del>	A		
Signature(By a director, pre	sident or other office	cer – if directors or offic	cers have not been
selected, by an inc	corporator – if in th	e hands of a receiver, tr	
appointed fiduciar	y by that fiduciary /	)	<i>,</i>
	ultis K	Kadau	
	(Typed or printed	name of person signing	)
Ŷ.	LESIDENT		
	(Title of person si	gning)	