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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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C Kiuzea nnr - J Suia

COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Person | Area Code & Daytime Telephone Number | 294 - 275Z Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address

Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

STR Wingerd In	of	
(Name of Corporation as curre	ontly filed with the Florida I	Dept. of State)
P 0800 (D 683106		-
(Document Numbe	r of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	ais Florida Profit Corporatio	n adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." o word "chartered." "professional association," or the abbreviatio	r "Co". A professional corp	proporated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BON</u>)		ZO19 JUN 25 AN 10: 3 SECHE ANASSEE, FI
D. If amending the registered agent and/or registered office as new registered agent and/or the new registered office addr		' ്": m
Name of New Registered Agent		
(Florida	street address)	
New Registered Office Address:		Florida(Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	ent: ir with and accept the obliga-	tions of the position.

Signature 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: <u>X</u> Change	PT John 1	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1)Change	1000 VP	Marek Dubec	12401 orange B
_ X Add			site 216
Remove			Davie F1 33330
2) Change	B VP	RadoSlav Holzer	12401 crange or
<u>_</u> X_ ∧dd			Siite 216
Remove			Davie F1 33330
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

жиасы ааашонаг мее	. <u>If amending or adding additional Articles, enter change(s) here:</u> (Attach additional sheets, if necessary), — (Be specific)					
				-		
						
						
					#****** #: ·	
						
					··· ,	
						
		···				
						
f an amendment pro provisions for imple	vides for an exch	iange, reclassifi	cation, or canc	ellation of issue	ed shares,	
(if not applicable	nienting the ame r. indicate N/A)	nament ii not c	ontainea in thi	<u>s anienamient to</u>	<u>sen:</u>	

The date of each amendment(s) adoption:	if other than the
late this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date of document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 4 24 19	
Signature Deven BC: O	
(By a director, president or other officer - if directors or others have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Steven T. Blind	
(Typed or printed name of person signing)	
President	

(Title of person signing)