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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	Artezia Group Inc		
DOCUMENT NUME			
	of Amendment and fee are so		
Please return all corres	pondence concerning this ma	atter to the following:	
	Trevor Hand		
		Name of Contact Perso	n
	Artezia Group Inc.		
		Firm/ Company	
	1856 Flowing Well Rd.	, ,	
-		Address	
	Bonitay, FL 32425		
-		City/ State and Zip Cod	e
into/a	arteziawater.com		
<u></u>	E-mail address: (to be u	sed for future annual report	notification
	to man address, the we a	see to ratate annual tegrore	TRACTICE CONTROL OF THE CONTROL OF T
For further information	concerning this matter, plea	se call:	
Trevor Hand		850 at (	576-5776 de & Daytime Telephone Number
Name o	f Contact Person	Area Cu	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amenc Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment

to .

Articles of Incorporation of

artezi	a Group Tr	· ·	
(Name of Corpora	ation as currently filed with t	he Florida Dept. of State	<u>e</u> )
TOSG(	tument Number of Corporation	(if known)	
Pursuant to the provisions of section 607,1006, Flor its Articles of Incorporation:	•		following amendment(s)
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co- word "chartered," "professional association," or h	rp," "Inc." or "Co". A prof		
B. Enter new principal office address, if applical (Principal office address <u>MUST BE A STREET AI</u>			
•			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E			
	<del></del>	<del></del>	<del></del>
D. If amending the registered agent and/or regist new registered agent and/or the new registere		a, enter the name of the	
Name of New Registered Agent			
		~·····	
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)		(Zip Code)
		· ***	
New Registered Agent's Signature, if changing R		12 m	
I hereby accept the appointment as registered agent	I am familiar with and accep	of the obligations of the p	osition.
		י ע	3
		្ត	Sh Pt
Sig	gnature of New Registered Age	ent, if changing	The state of the 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)

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	<u>PT</u>	John Doe	
X Remove	V	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
I) Change	<u>V</u>	Trevor Hand	1197 Hickory RIdge Rd.
X Add			Chipley, FL 32428
Remove			
2) <u>-</u> Change			
Add			- 17 - 17 12 - 17 - 17 - 17 - 17 - 17 -
Remove			
3 ) Change	<del></del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
		**************************************	
Add			11.1
Remove			

f 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)	Attach additional sheets, if necessary).	i <u>cles, enter change(s) here</u> : (Be specific)
f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:		
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	provisions for implementing the amen	ndment if not contained in the amendment itself:
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The date of each amendment(s) adoption:, i	f other than the
date this document was signed.	
04/27/2018 Effective date if applicable:	
(no more than 90 days after amendment file date)	<del></del>
•	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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)	
(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 4/27/2018 Signature Randall a. Hand	
Signature Randall a, Hand	
(By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Title of pareau signing)	