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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Nexxys inc				
DOCUMENT NUMI	P10000012251	······································			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Robert M Ward				
		Name of Contact Person	· · · · · · · · · · · · · · · · · · ·		
	Nexxys Inc				
		Firm/ Company			
	13 Vicksburg PL				
		Address			
	Newport RI 02840				
		City/ State and Zip Code	<u> </u>		
	nexxysinc@gmail.com				
	= = =	sed for future annual report	notification)		
For further informatio Robert M Ward	n concerning this matter, plea	se call: at (、524-6942		
Name	of Contact Person	at (Area Coo	le & Daytime Telephone Number		
Enclosed is a check fe	r the following amount made	payable to the Florida Depa	rtment of State:		
S35 Filing Fee	S43.75 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)		
Mai	ling Address		\ddress		
Am	endment Section		ment Section		
	ision of Corporations . Box 6327		n of Corporations entre of Tallahassee		
	aliassee, FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Mar. 1-8 1" 9:56

to

Nexxys Inc	
(Name of Corporat	tion as currently filed with the Florida Dept. of State)
P10000012251	
(Docu	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the c	corporation:
R Ward Industries Corporation	The new
name must be distinguishable and contain the word "c "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbr	corporation," "company," or "incorporated" or the abbreviation "Corp.," ," or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>OX</u>)
D. If amending the registered agent and/or registence new registered agent and/or the new registered	ered office address in Florida, enter the name of the I office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Red I hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and accept the obligations of the position.
Sign	nature of New Registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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	PT	John Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	Title		Name	Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove 3) Change	-	_		
Add				
Remove				
4) Change				
Add				
Remove				· · · · · · · · · · · · · · · · · · ·
5) Change		_		
Add				
Remove				
6) Change		_		
Add	-			
Remove				

amending or adding additional Arti	cles, enter change(s) here:
ttach additional sheets, if necessary).	(Be specific)
·	anne and aniformine or anneallation of insued shows
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and an analysis of the amendment itself:
(if not applicable, indicate N/A)	
	<u> </u>

The date of each amendment(s) adoption:	
date this document was signed.	
March 4, 2021	
Effective date <u>if applicable</u> : (no n	nore than 90 days after amendment file date)
Note: If the date inserted in this block does not mee document's effective date on the Department of State's	t the applicable statutory filing requirements, this date will not be listed as the records.
Adoption of Amendment(s) (CHECK)	<u>ONE</u>)
The amendment(s) was/were adopted by the incorpaction was not required.	orators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareh by the shareholders was/were sufficient for approv	olders. The number of votes cast for the amendment(s) al.
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group	holders through voting groups. The following statement entitled to vote separately on the amendment(s):
"The number of votes east for the amendment	(s) was/were sufficient for approval
Robert M Ward, Director	••
(voting gro	oup)
March 4, 2021 Dated	
Signature CaseM	Ward
	r other officer if directors or officers have not been
selected, by an incorporate appointed fiduciary by that	or – if in the hands of a receiver, trustee, or other court at fiduciary)
Robert M Ward	
(Typed	or printed name of person signing)
Director	
(Title o	f person signing)