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COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: ____ UNIVERSE TECH INC. P10000026685 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ERWIN T VILLEUAS

Name of Contact Person Firm/ Company E-mail address: Ito be used for future annual report notification For further information concerning this matter, please call: ERWIN T. VILLEUAS at (786) 426-1440

Name of Contact Person Area Code & Daytime Telephone Number 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 Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations**

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to

Articles of Incorporation of

| UNIVERSE TECH INC | | |
|---|---|---------------------------|
| —————————————————————————————————————— | filed with the Florida Dept. of State) | <u> </u> |
| P10000026685 | | 3.07 |
| (Document Number of C | Corporation (if known) | EEC. |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> | orida Profit Corporation adopts the following | \sim |
| its Articles of Incorporation: | | |
| A. If amonding name enter the new name of the corneration: | | · <u>·</u> |
| A. If amending name, enter the new name of the corporation: | | S. S. |
| | | _The \new |
| name must be distinguishable and contain the word "corporation," "cor "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A function "P.A." | npany, or "incorporated or the abbreviati professional corporation name must conta | on "Corp., in the word |
| B. Enter new principal office address, if applicable: | 5911 NW 102 AVE | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | DORAL , FLORIDA 33 | 178 |
| | | |
| C. Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | 5911 NW 102 AUE | |
| | DORAL FLORIDA 33 | 3178 |
| | | |
| | | |
| D. If amending the registered agent and/or registered office address | s in Florida, enter the name of the | |
| new registered agent and/or the new registered office address: | | |
| Name of New Registered Agent HERNANDEZ | LAW, P.L. | _ |
| <u>4810 SW 3</u> | • | |
| (Florida street | address) | _ |
| New Registered Office Address: MIAMI | Florida_ 33 | 155 |
| | ity) (Zip | Code) |
| | | |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit | h and accept the obligations of the position. | |
| | | _ |
| Signatur d of New Reg. | istered Agent, if changing | |
| Check if applicable | | |

☐ 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)

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 Doc | | | |
|-------------------------------|--------------|-------------|-----------|-------------|---------|
| X Remove | <u>v</u> | Mike Jones | | | |
| X Add | <u>sv</u> | Sally Smith | | | |
| Type of Action (Check One) | <u>Title</u> | <u>Nar</u> | <u>me</u> | | Address |
| 1) Change | | | | _ | |
| Add | | | | | |
| Remove | | | | | |
| 2) Change | | | | _ | |
| Add | | | | | |
| Remove 3) Change | <u></u> | | | | |
| Add | | | | | |
| Remove | | | | | |
| 4) Change | | _ | | | |
| Add | | | | | |
| Remove | | | | | |
| 5) Change | ••• | _ | | | |
| Add | | | | | |
| Remove | | | | | |
| 6) Change | | _ | <u> </u> | | |
| Add | | | | | |
| Remove | | | | | |

| | or adding additional Aronal sheets, if necessary). | . (Be specific) | | | |
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| | ent provides for an exc | change, reclassifica | tion, or cancellation | of issued shares | 1 |
| f an amendm | or implementing the amplicable, indicate N/A) | iendment it not cor | itained in the amen | dment itself: | |
| provisions fo | processe, marcuic (ore) | | | | |
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| The date of each amendment(s) adoption: | , if other than the |
|--|--|
| Effective date <u>if applicable</u> : | |
| (no more than 90 days after | amendment file date) |
| Note: If the date inserted in this block does not meet the applicable statute document's effective date on the Department of State's records. | ory filing requirements, this date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| ☐ The amendment(s) was/were adopted by the incorporators, or board of direction was not required. | ectors without shareholder action and shareholder |
| The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval. | votes cast for the amendment(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separate. | |
| "The number of votes cast for the amendment(s) was/were sufficien | t for approval |
| by | . " |
| by | |
| Dated 12/18/2020 | |
| Signature Objection, president or other officer – if directions of the officer – if directions of the objection of the objec | Annual of the second se |
| selected, by an incorporator – if in the hands of a | |
| appointed fiduciary by that fiduciary) | |
| ERWIN J. VILL | ∓ hA < |
| (Typed or printed name of per | son signing) |
| PRESTDENT | |
| (Title of person signing) | |