## P11000087576

(Re	questor's Name)	
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## COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: Prone Technologies, Inc.

Drone Technologies, Inc.

Drone Technologies, Inc. The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: racy Leighton
Name of Contact Person Firm/ Company 4 cher court
Address Palm Coart, FC 32/37
City/ State and Zip Code NFOG bridge Venture group com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Tracy Leighton at 386, 986-8690

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: ☐ \$35 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 (Additional Copy enclosed) is enclosed) Street Address Mailing 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 Prone Technologies, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P1100087576 (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

	restments, In	<u>C.                                    </u>	The new
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp." "chartered," "professional association," or the c	d "corporation," "company," ( 'Inc," or "Co". A profession	or "incorporated"	or the abbreviation "Corp.,"
B. Enter new principal office address, if applie			
(Principal office address <u>MUST BE A STREET</u>	(ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	F ROY)		
(multing address <u>MAT DI. A FOST OFFICE</u>			
new registered agent and/or the new register	gistered office address in Florered office address:	rida, enter the nai	me of the
D. If amending the registered agent and/or remew registered agent and/or the new registered agent and/or the new registered agent	gistered office address in Flor ered office address:	rida, enter the nai	me of the
new registered agent and/or the new register	gistered office address in Florered office address:  (Florida street address)		me of the
Name of New Registered Agent	ered office address:  (Florida street address)		
	ered office address:  (Florida street address)		, Florida(Zip Code)
new registered agent and/or the new register  Name of New Registered Agent	ered office address:  (Florida street address)		
new registered agent and/or the new register  Name of New Registered Agent  New Registered Office Address:  New Registered Agent's Signature, if changing	(Florida street address)  (City)		, Florida(Zip Code)
new registered agent and/or the new register  Name of New Registered Agent	(Florida street address)  (City)		, Florida(Zip Code)
new registered agent and/or the new register  Name of New Registered Agent  New Registered Office Address:  New Registered Agent's Signature, if changing	(Florida street address)  (City)		, Florida(Zip Code)

Check if applicable

 $\Box$  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.

Example: X Change	<u>PT</u>	John Do	<u>be</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change				
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4) Change				
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5) Change				
Add	-	_		
Remove				
6) Change				
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	adding additional Articles al sheets, if necessary). (B	le specific)		
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an amendme	nt provides for an exchang	ve. reclassification, or	cancellation of issued	d shares.
an antendare	implementing the amendn	nent if not contained i	n the amendment its	elf:
provisions for	icable, indicate N/A)			<u> </u>
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The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file	date)
<b>Note:</b> If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing require partment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado action was not required.	oted by the incorporators, or board of directors without sh	nareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes cast for the Ticient for approval.	e amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amen	lowing statement dment(s):
"The number of votes cast t	for the amendment(s) was/were sufficient for approval	
by	<u></u> , <del>"</del>	
, <u> </u>	(voting group)	
Dated 4/	1/22	
Signature		<u> </u>
selected	rector, president or other officer – if directors or officers leads of a receiver, trusteed fiduciary by that fiduciary)	
-	Paul Leishton (Typed or printed name of person signing)	
	(Typed of printed fiante of person signing)	
	CEO	
	(Title of person signing)	