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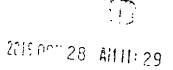
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Iron-K	CLAD Firearms, Inc.
DOCUMENT NUMBER: P12000096	299
The enclosed Articles of Amendment at	
Please return all correspondence concer	ning this matter to the following:
Damian Landeiro	υ
	Name of Contact Person
	Firm/ Company
12350 SW 132no	d Court Suite 207
Miami, FL 3318	Address
WHITH, 11, 55 Loc	City/ State and Zip Code
dlandeiro@iron-kclad.a	·
	ess: (to be used for future annual report notification)
For further information concerning this	
Name of Contact Person	at ( 786 ) 402-6692  Area Code & Daytime Telephone Number
	nount made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Fil Certificate	- · · · · · · · · · · · · · · · · · · ·
Mailing Address Amendment Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 3231-	Clifton Building

## Articles of Amendment to Articles of Incorporation of



to

Iron-KCLAD Firearms, Inc.

(Name of Corporation as current	ly filed with the Florida Dept. of State)
P12000096299	
(Document Number o	of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
Iron-KCLAD, Inc.	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or " word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
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 MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	<del></del>
new regiments agent and of the new regiments of the address	<u>.</u>
Name of New Registered Agent	
(Florida sti	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
N. D. C. La M. C. A. C. L. C. D. Called A. C.	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
	, , , , , , , , , , , , , , , , , , , ,
Signature of New I	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: X Change	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>8V</u>	Sally Sn	<u>nith</u>	
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		_		
Add				
Remove				
4) Change				
Add		-		
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	<pre>cles, enter change(s) here:   (Be specific)</pre>		
			•••
<u> </u>			
· · · · · · · · · · · · · · · · · · ·			
an amendment provides for an exch	ange, reclassification, or c	ancellation of issued	shares.
provisions for implementing the amer (if not applicable, indicate N/A)	nament it not contained in	the amendment usen	<u>:</u>
(4) 144,			
	<del></del>		
		-	

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this da Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s sufficient for approval.	)
	pproved by the shareholders through voting groups. The following stateme or each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	· · · · · · · · · · · · · · · · · · ·	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholde	r
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
10/24/20 Dated	19	
Signature	Her I	
(By a selec	director, president of other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other cour inted fiduciary by that fiduciary)	
	Damian Landeiro	
	(Typed or printed name of person signing)	,
	President	
	(Title of person signing)	