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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	AATION: Wilrose, Inc.	 		
DOCUMENT NUME			· ·	
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	William M. Boggs			
	Name of Contact Person			
	Firm/ Company			
	1714 SW Wacahoota Road			
		Address	· · · · · · · · · · · · · · · · · · ·	
	Micanopy, FL 32667			
	11	City/ State and Zip Cod	c	
willbe	oggs@willboggs.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information William Boggs	n concerning this matter, pleas		446-9156	
	of Contact Person	at (352	de & Daytime Telephone Number	
	r the following amount made:			
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amo Divi P.O.	ling Address andment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Bassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

viirose, inc.	•
(Name of Corporation as currently filed with the Florida Dept. of State)	_
213000022812	
(Document Number of Corporation (if known)	
cursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s Articles of Incorporation:	(s) I
. If amending name, enter the new name of the corporation:	
Rosewill, Inc. The new	
ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the ord "chartered," "professional association," or the abbreviation "P.A."	
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
N/A	
 If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: 	
Name of New Registered Agent N	A
(Florida street address)	
New Registered Office Address:, Florida	
(City) (Zip Code)	
lew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	

Signature of New 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 Doc			
				N/A	
X Remove	$\underline{\mathbf{V}}$	Mike Jones		• • / / 1	
X Add	<u>SV</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Change	· · · · · ·				
Add					
Remove					
2) Change					
Add					
Кетюче					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add				-	
Remove					

	vets, if necessary). (ve specific)	,		
			N/	A	
					
				<u> </u>	
				·	
an amendment ni	ovides for an exchan	ne reclassificat	ion or cancellati	on of issued shares	•
provisions for imp	ementing the amend	ment if not con	tained in the ame	ndment itself:	23
(if not applical	le, indicate N/A)				
			N/A		
			10//1		
					<u> </u>
					

The date of each amendment(s fate this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	·
	is block does not meet the applicable statutory filing requirements, this day 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 by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(se sufficient for approval.	5)
	approved by the shareholders through voting groups. The following stateme for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholde	r
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
October Dated	r 24, 2018	
Signature	William MBopp	
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other cour pointed fiduciary by that fiduciary)	1
	William M. Boggs	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	