## P13 00000 26524

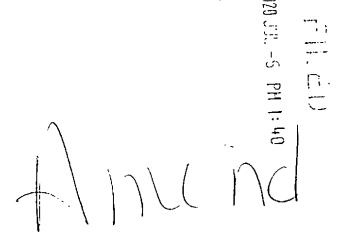
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:AUTON	LATIONS & TECHNICS INC				
DOCUMENT NUMBER: P13000	0026524				
The enclosed Articles of Amendment and fee are s	ubmitted for filing.				
Please return all correspondence concerning this m	atter to the following:				
_					
	Name of Contact Person				
AUTOMATIONS & TECHNICS INC.					
9220 SW 3rd ST APT 915 Address					
	Address				
Boca R	ATON / FL 33428  City/ State and Zip Code				
-	City/ State and Zip Code				
aaa	Ani. Canana				
E-mail address: (to be a	ARLICGMAIL.(OM used for fature annual report notification)				
For further information concerning this matter, please call:					
DARLI	at ( <u>561</u> ) <u>303-9654</u> Area Code & Daytime Telephone Number				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made	e payable to the Florida Department of State:				
\$35 Filing Fee \$\sum \text{\$\sum \\$43.75 Filing Fee & Certificate of Status}\$	Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address	Street Address				
Amendment Section Division of Corporations	Amendment Section Division of Corporations				
P.O. Box 6327	The Centre of Tallahassee				
Tallahassee, FL 32314	2415 N. Monroe Street, Suice 810				
	Tallahassee, FL 32303				

## Articles of Amendment to Articles of Incorporation

οſ

AUTOMATIONS É TECH	PHICS INC
(Name of Corporation as currently	filed with the Florida Dept. of State)
P13000026524	
(Document Number of )	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Iorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "co	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", A "chartered," "professional association," or the abbreviation "P.A."	professional corporation name must contain the word
B. Enter new principal office address, if applicable:	9220 SIAB 3rd ST #915
(Principal office address MUST BE A STREET ADDRESS)	BOLA RATION, FL 33428
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9220 B/W 3id ST # 915 BOLA RATION, FL 33428
D. If amending the registered agent and/or registered office address:  /	ss in Florida, enter the name of the
Name of New Registered Agent V/A	
(Florida stree	n address)
New Registered Office Address:	, Florida
	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	
Signature of New Reg	gistered Agent, if changing
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c)	gistered 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 De	<u>) e</u>				
X Remove	<u>V</u>	Mike Jo	nes				
X Add	<u>SV</u>	Sally Sr	nith				
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s		
1) Change	CEC	<u>&gt;</u>	RENEY	AVILA MARRERO	3261	w toth	TERR
_X_ Add					HIAL	EAH GARI	
Remove						33018	3
2) Change							
Add							
Remove 3) Change		_					
Add							
Remove							
4) Change			<del></del>				
Add							
Remove							
5) Change		_					
Add							
Remove							
6) Change							
Add							
Remove							

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
- AMENDENG ARTICLE TV - SHARES ANTHORIZED IS: 5000
SHARES WILL BE 50% TO EACH OFFICER OF THE CORPORATION
- ARTICLE VII - OFFICER(S) ARE:
TITLE : P
DARLI DASILVA
9220 SW 3rd ST APT 915
BOLA RATION, FL 33428
TITE: CEO
RONEY ANLA
3261 W 70th TERR
HIALEAH GARDENIS, FL 33018
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
<u>provisions for implementing the amendment if not contained in the amendment itself:</u> (if not applicable, indicate N/A)

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date if applicable:	06/23/2020	
	OG [23/2020] (no more than 90 days after amendmen	t file date)
Note: If the date inserted in this bedocument's effective date on the D	clock does not meet the applicable statutory filing respartment of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors with	out shareholder action and shareholder
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east afficient for approval.	for the amendment(s)
	proved by the shareholders through voting groups. The each voting group entitled to vote separately on the	
"The number of votes cast	for the amendment(s) was/were sufficient for approv	al
by	(voting group)	_,"
	(voting group)	
Dated	5/23/2020	
Signature	(23/2020 (Pali (Paffra	<u> </u>
(By a c	irector, president or other officer – if directors or offi d, by an incorporator – if in the hands of a receiver, to	
	ted fiduciary by that fiduciary)	usice, or other court
	DARLI DASILVA (Typed or printed name of person signing	
	(Typed or printed name of person signing	()
	PRES	
	(Title of person signing)	