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14 DEC -1 AN II: 40

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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	AATION: BAQ AIR	TECHNOLOG	GIES INC			
NAME OF CORPOR DOCUMENT NUME	D1400000		<u> </u>			
The enclosed Articles	of Amendment and fee are su	ubmitted for filing.				
Please return all corres	pondence concerning this ma	atter to the following:				
		MERCEDES	BAUTISTA			
	Name of Contact Person TAX ACCOUNTING PLUS					
	Firm/ Company 495 NW 27 AVE					
	MIAMI, FL 33125					
		City/ State and Zip Cod Capabolition Sed for future annual report	.net			
For further information	concerning this matter, pleas	•	,			
MER	CEDES BAUT	1STA _{at (} 786	, 615-3057			
	f Contact Person		de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:			
\$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)			
Amer Divis P.O.	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

14 DEC -1 AM II: 41

BAQ AIR TECHNOLOGIES, INC.

(Name of Corporation as currently filed with the Florida Dept, of State)

P1400004519

(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:

A. If amending name, enter the new name of the corporation:

e must be distinguishable and contain the word "co p.," "Inc.," or Co.," or the designation "Corp," "In	
l "chartered," "professional association," or the abbre	
Enter new principal office address, if applicable: acipal office address MUST BE A STREET ADDRESS	N/A
nter new mailing address, if applicable: Auiling address <u>MAY BE A POST OFFICE BOX</u>)	N/A
amending the registered agent and/or registered of ew registered agent and/or the new registered office	
w registered agent and/or the new registered office	address:
w registered agent and/or the new registered office Name of New Registered Agent N/A	address:
w registered agent and/or the new registered office Name of New Registered Agent N/A	address:

Page 1 of 4

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VΡ	ARCIERI BRUNO	7512 NW 72 AVE
Add			MEDLEY, FL 33166
Remove			
2) Change	VP	ERICH CASTRO	7512 NW 72 AVE
Add			MEDLEY, FL 33166
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			· ·· <u>,</u>

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter char	ige(s) here:				
N/A	(De specifie)					

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- 400					<u></u>	-,
F. If an amendment provides for an exch provisions for implementing the amer	ange, reclassification	cation, or car	ncellation o	f issued sha ent itself:	res,	
(if not applicable, indicate N/A)						
N/A						
			·			
			_			
						

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	-
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adoption the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
The amendment(s) was/were appropriately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adoption was not required.	oted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopaction was not required.	oted by the incorporators without shareholder action and shareholder	
Dated 11/24/20	014	
Signature	hawya	
	rector, president or other officer if directors or officers have not been by an incorporator - if in the hands of a receiver, trustee, or other court	
	ed fiduciary by that fiduciary)	
	RAFAEL SAMPER	
-	(Typed or printed name of person signing)	
-	PRESIDENT	<u>.</u>
	(Title of person signing)	