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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: SQUIRREL BYTES. INC. DOCUMENT NUMBER: P14000088336 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ronald R. Robinson Name of Contact Person Firm/ Company 11404 Suncreek PL Address Tampa, FL 33617 City/ State and Zip Code riki@tortugatwins.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: _at (727) 692-7160 Area Code & Daytime Telephone Number Ronald R. Robinson Name of Contact Person

\$35 Filing Fee

☐\$43.75 Filing Fee & Certificate of Status

Enclosed is a check for the following amount made payable to the Florida Department of State:

S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)

☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

SQUIRREL BYTES, INC.

| Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following arrits Articles of Incorporation: A. If amending name, enter the new name of the corporation: Wizard Wyrks. Inc. The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Co"Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: | |
|---|-------------------------|
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following arrites Articles of Incorporation: A. If amending name, enter the new name of the corporation: Wizard Wyrks. Inc. | |
| A. If amending name, enter the new name of the corporation: Wizard Wyrks, Inc. The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "C "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the "chartered," "professional association," or the abbreviation "P.A." | |
| Wizard Wyrks, Inc. | nendment(s) to |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "C" inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the "chartered," "professional association," or the abbreviation "P,A." | |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "C". "Inc.," or "Co". A professional corporation name must contain the "chartered," "professional association," or the abbreviation "P.A." | e new |
| B. Enter new principal office address, if applicable: | Corp.," |
| | |
| (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) | |
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| | |
| D. 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 | |
| | |
| (Florida street address) | |
| New Registered Office Address:, Florida | |
| New Registered Office Address. (City) (Zip Code | •) |
| | |
| | |
| New Registered Agent's Signature, if changing Registered Agent: | |
| I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. | |
| | 3 |
| | <u>ာ</u> |
| Simulation of New Projectional Assemt if changing | |
| Signature of New Registered Agent, if changing | S-section 12-section |
| | • • |

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)

Example:

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.

| X_Change | PT | John_De | <u>oe</u> | |
|----------------------------|-----------|---------|-------------------------|--------------------------|
| X Remove | <u>V</u> | Mike Jo | <u>ones</u> | |
| <u>X</u> Add | <u>sv</u> | Sally S | <u>mith</u> | |
| Type of Action (Check One) | Title | | Name | <u>Addres</u> s |
| 1) Change | v | | Christopher M. Madriaga | 833 Lake Street |
| X Add | | | | Salt Lake City, UT 84102 |
| Remove | | | | |
| 2) Change | | _ | | |
| Add | | | | |
| Remove 3) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | · |
| 5) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | | | |
| Add | | | | |
| Remove | | | | |

| ttach additional sheets, if necessary). | (Be specific) |
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| an amendment provides for an exch | hange, reclassification, or cancellation of issued shares, |
| provisions for implementing the ame | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| an amendment provides for an exchorovisions for implementing the ame (if not applicable, indicate N/A) | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| provisions for implementing the ame | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| provisions for implementing the ame | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
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| provisions for implementing the ame | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |

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| | doption:, if other than the |
|---|--|
| date this document was signed. | |
| Effective date if applicable: | (no more than 90 days after amendment file date) |
| | (no more than 90 days after amenament fite date) |
| Note: If the date inserted in this bedocument's effective date on the D | lock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records. |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) |
| ☐ The amendment(s) was/were ad by the shareholders was/were so | opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval. |
| ☐ The amendment(s) was/were ap must be separately provided for | proved 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 | for the amendment(s) was/were sufficient for approval |
| by | (voting group) |
| | (voting group) |
| ☐ The amendment(s) is/are being | fled pursuant to s. 607.0120 (11) (e), F.S. |
| The amendment(s) was/were ad action was not required. | opted by the incorporators, or board of directors without shareholder action and shareholder |
| January 10 Dated | |
| | irector, president or other officer—if directors or officers have not been |
| | d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary) |
| | Ronald R. Robinson |
| | (Typed or printed name of person signing) |
| | P/S |
| | (Title of person signing) |

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