P14000091868

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SECRETARY OF STATE AND A WASSEEL FLORIDA

FEB 2 3 2016 T. **LEMIEUX**



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	<u> </u>	Machi	ning solutions Inc		
DOCUMENT NUMBER:	P		091868.		
The enclosed Articles of Amend	ment and fee are submitted	for filing.			
Please return all correspondence	concerning this matter to the	e following:			
		USON C	: Lunch		
-	Nam	e of Contact Person	Lynch.		
	Da Mac	Firm/ Company	a solutions, Inc.		
	37845	· <u>-</u>	Avenue.		
Address					
,	City	State and Zip Code	,		
Ledicated marrie a att-net					
E-mail address: (to be used for future annual report notification)					
For further information concerning	ng this matter, please call:				
Name of Contact	a La VIA.	at (A Sy Area Cod	2) 767-3342 e & Daytime Telephone Number		
Enclosed is a check for the follow	ving amount made payable t	to the Florida Depar	tment of State:		
	rtificate of Status Cert (Add	.75 Filing Fee & iffied Copy litional copy is losed)	□\$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** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incor	poration
D2 Machinin	a Solutions Inc.
(Name of Corporation as currently	iled with the Florida Dept. of State)
P 1400	000091868
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatistical Articles</i> of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	". 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)	NA
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address: Name of New Registered Agent	s in Florida, enter the name of the
(Florida street	address)
New Registered Office Address:	, Florida
(2)	ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.

Page 1 of 4

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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
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) Chanca			
4) Change Add			
Add Remove			
5) Change			
Add			
Remove			-
6) Change			
Add			
Remove			

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·				18 th o reducement to more	
		<u> </u>	·		
an amendment	provides for an exch	ange, reclassification,	or cancellation of issu	ed shares,	
orovisions for im	plementing the amenable, indicate N/A)	ndment if not containe	<u>d in the amendment it</u>	<u>self:</u>	
(ij noi applict	iote, maicute 1471)				
MON	SWIRS	ISSUED	to 166	$\mathcal{D} \mathcal{A} \mathcal{A}$	1110
1000	<u> </u>	12000	10 14	SO(1)	
			\cup		(P+)
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	t
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature Jason C. L	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
ason C. Lynch) <u>. </u>
(Typed or printed name of person signing)	
President	
(Title of person signing)	