P14000095860

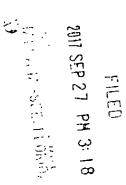
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C. GOLDEN SEP 2 8 2017

COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION	Entropy Technology Design, Inc. P14000095860
DOCUMENT NUMBER:	1 110000 131300
The enclosed Articles of American	ment and fee are submitted for filing.
Please return all correspondence	concerning this matter to the following:
	Name of Contact Person Entropy Technology Dosign, Inc. Firm/Company OG Cross Gek Blvd #415 Address Tampa FL 33447 City/ State and Zip Code ###################################
For further information concern	ng this matter, please call:
Name of Contact	Person at (813) 361-94-75 Area Code & Daytime Telephone Number
Enclosed is a check for the foll-	wing amount made payable to the Florida Department of State:
_	3.75 Filing Fee & Status Sertified Copy Certificate of Status (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
<u>Mailing Ado</u> Amendment Division of C P.O. Box 632	Amendment Section rporations Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment 10/1 SEP 2/1/20 Articles of Incorporation (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: The new name 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 word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (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.

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	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1)Change	D	Dr. Richard Pavelle	10000 Cross Creek Blvd. #415
AddRemove			Tampa, FL 334+7
2)Change	1)	Gary Sargent	10006 Cross Cleek Alvol #415 Tampa FL 33647
Remove 3) Change Add	D	Oveda Hancock	10006 (ross Crock Blyd. #415 Tampa FL 33647
Remove			
4) Change			
Remove			
5)Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ts, if necessary). , (Be s	зр е снис)			
					
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		reclassification, or	cancellation of issu	ed shares, iself:	
an amendment provisions for impler (if not applicable	menting the amendmen indicate N/A)				
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• • • •
The date of each amendment(s) adoption: $Gacy Savgent add Aug 1,3017 - all other than the date this document was signed. an endine of Sept. 20,2017$
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 will not be listed as the document's effective date on the Department of State's records.
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):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
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 () (20, 2017
Signature Same Aspata
(By a director, president or other difficer – 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)
Tami Fitzpatrick
(Typed or printed name of person signing)
CEO
(Title of person signing)

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