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(Requ	estor's Name)
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(City/S	State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busin	ess Entity Name)
(Document)	ment Number)
Certified Copies	Certificates of Status
Special Instructions to Fili	ng Officer:

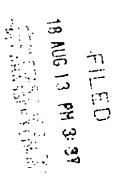
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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Address E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

Entropy Techi	inology Design, Inc.	
·	currently filed with the Florida Dept. of State)	
#P14000	CO95860	
(Document Nu	umber of Corporation (if known)	_
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation: A. If amending name, enter the new name of the corporat	tes, this Florida Profit Corporation adopts the following amendment(s)	to
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc, word "chartered," "professional association," or the abbrevi	The new rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the viation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS		
	<u>// 33</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
	<u>્ર</u>	
D. If amending the registered agent and/or registered office and/or the new registered agent and/or the new registered office a		
01/0		
Name of New Registered Agent / V/ P		
(FIC	lorida street address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		
Signature o	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	<u>PT</u>	John Doe	
X Remove		Mike Jones	
	<u>V</u>		
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change	D	Gary Sargent	10006 Cross Geek Blue #415
Add Remove		1 -	Tampa, FL 33647
2)Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	·····		
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			

<u>If amending</u> (Attach <i>addi</i>	<u>q or adding additi</u> itional sheets, if ne	ional Articles, er cessary) //84 s	nter change(s) he pecific)	<u>re</u> :		
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lf an amen	dment provides fo	or an exchange, i	reclassification, o	or cancellation of	issued shares,	
provisions (if not	s for implementing applicable, indica	the amendmen	t if not contained	l in the amendme	<u>nt itself:</u>	
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The date of each amendment(s) adoption:
Effective date if applicable: 45, 3018
(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
(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 Aug 9, 2018
Signature Jani Hapata
(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)
Tami Fitzpatrick
(Typed or printed name of person signing)
CEO
(Title of person signing)