P/500009783

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City.	/State/Zip/Phon	e #)
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(Bus	iness Entity Nar	me)
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TALLAHASSEE FLORIDA

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COVER LETTER

Division of Cor				
NAME OF CORPO	PRD Technology,	Inc		
DOCUMENT NUA	P15000009783 OBER:			
The enclosed Article	us of Amendment and fee are su	ibmitted for filing.		
Please return all con	respondence concerning this ma	tter to the following:		
	Samantha Jenkins			
	***************************************	Name of Contact Person	200	
	PRD Technology, Inc			
		Firm/ Company		
	556 Brookwood In,			
		Address		
	Maitland, Fl, 32751			
		City/ State and Zip Co	de	
san	ni@prdtechnology.net			
	E-mail address: (to be u	sed for future annual repor	t notification)	
For further informati	ion concerning this matter, plea	se call:		
Samantha Jenkins	•	407 at (920-0490	
Name of Contact Person		Area C	ode & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Dep	partment of State:	
S35 Filing Fee	□\$43.75 Filing Fee &	□\$43.75 Filing Fee &	□\$52.50 Filing Fee	
Paid.	Certificate of Status	Certified Copy	Cortificate of Status	
,,-		(Additional copy is	Certified Copy	
		enclosed)	(Additional Copy is enclosed)	
Mailing Address			Address	
	mendment Section		dment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
	ilahassee, FL 32314		Executive Center Circle	
		Tailal	nassee, FL 32301	

to then the

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Articl	les of Amendment to
Article	s of Incorporation
PRD Technolog	V ThC.
(Name of Corporation a)	Frently filed with the Florida Dept. of State)
P1500	2000 9783
(Document Nu	mber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporati	ion;
name must be distinguishable and contain the word "corp "Corp," "Inc," or Co.," or the designation "Corp," "Inc, word "chartered," "professional association," or the abbrevia 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 offic new registered agent and/or the new registered office ad	
Name of New Registered Agent	
(Flori	rida street address)
·	. Florida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature. If changing Registered I I hereby accept the appointment as registered agent. I am fam	Agent: niliar with and accept the obligations of the position.
Signature of i	New Registered Agent, if changing

Page 1 of 4

se where than LIC

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)

أرير الهلك الأرمضيية بالمكر فالمعيسات بالراج

Please note the officeridirector 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 Doe	
X Remove	¥	Mike Jones	
X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change .	VP	Daniel Jenkins	556 Brookwood Ln
Add			Maitland
X Remove			FI 32751
2) Change			
Add	•		
Remove			
3) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove		•	
4) Change		_	,
Add			h a a a a a a a a a a a a a a a a a a a
Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

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Attach <i>addit</i>	t or adding additi tional sheets, if ne	ional Articles, enter cessary). (Be spec	change(s) here:		
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provisions f	ment provides for for implementing applicable, indicate	an exchange, recla the amendment if z c N/A)	ssification, or canc tot contained in the	ellation of issued sh amendment itself:	ACSS.
·····					
	-			·	
					

he date of each amendment(s) adoption:	, if other than the
ate this document was signed. October 16th, 2017	
iffective date if applicable:	
(no more than 90 days o	fter amendment file date)
Note: If the date inserted in this block does not meet the applicable stricement's effective date on the Department of State's records.	stutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	er of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through ve must be separately provided for each voting group entitled to vote se	
The number of votes cast for the amendment(s) was/were suffi	cient for approval
by	99
(voting group)	
 The amendment(s) was/were adopted by the board of directors witho action was not required. The amendment(s) was/were adopted by the incorporators without sl 	
action was not required.	
October 16th 2017	
Dated .	•
Signature	
By a director, president or other officer -	
selected, by an incorporator - if in the har	ds of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)	
Samentha Jenkins	
(Typed or printed name	e of person signing)
Owner	Pres.
	erron ciamino)