P150001/546

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

TO

MAY 08 2017



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	Prime Equipment DRATION:	Services Inc		
DOCUMENT NUM	P15000011546 4BER:			
	es of Amendment and fee are su	bmitted for filing.		
	respondence concerning this ma	_		
		g.		
	Terry Soltz			
		Name of Contact Perso	n	
	Prime Equipment Services In	ne		
		Firm/ Company		
	14280 sw 142 street ste 208			
		Address		
	Miami, Fl 33186			
		City/ State and Zip Cod	e	
gara	ageeq@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
Terry Soltz		305 at (986-4892	
Name	e of Contact Person		de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
	-			
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy	□\$52.50 Filing Fee Certificate of Status	
		(Additional copy is	Certified Copy	
		enclosed)	(Additional Copy	
			is enclosed)	
Mailing Address			Address	
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			on of Corporations Building	
		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

(Name	of Corporation as currently	filed with the Florida Deptnef State)
Prime Equipment Services Inc	-	The will the Piorida Depart State - 4 P 4: 16
Pursuant to the provisions of section 607	(Document Number of	Corporation (if known) IALLAHASSEE, FLORING (s) to corporation adopts the following afficient(s) to
its Articles of Incorporation:	1000, 11011da Gialdico, ilio 1	to the state of th
A. If amending name, enter the new na	ame of the corporation:	· •
		The new
	nation "Corp," "Inc," or "C	," "company," or "incorporated" or the abbreviation To". A professional corporation name must contain the P.A."
B. Enter new principal office address,	if applicable:	
(Principal office address <u>MUST BE A S</u>		
		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		
(Managements) MAT BEAT OFF	<u> </u>	
D. If amending the registered agent and		ss in Florida, enter the name of the
new registered agent and/or the new	Terry Soltz	
Name of New Registered Agent		
	14280 sw 142 street ste 20	8
	(Florida stree	et address)
New Products of Control	Miami	33186
New Registered Office Address:		, Florida City) (Zip Code)
	,	(
New Registered Agent's Signature, if c	hanging Registered Agent:	
		ith and accept the obligations of the position.
	Levelate	
*	Jones	
	Signature of New Re	distered 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	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
x 1) Change	PD	Mark Soltz	14280 sw 142 street
Add			ste 208
x Remove			Miami, Fl 33186
2) Change	PSD	Terry Soltz	8091 sw 90 ave
X Add			Miami, Fl 33186
Remove	SD	Telva Soltz	14280 sw 142 street
3) Change		_	ste 208
Add x Remove			Miami, Fl 33186
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

	adding additional Articles, enter change(s) here: al sheets, if necessary). (Be specific)	
	, .	
		
		_
		
· · · · · · · · · · · · · · · · · · ·		
· ·		
•		
<u>f an amendme</u>	nt provides for an exchange, reclassification, or cancellation of issued shares,	
	implementing the amendment if not contained in the amendment itself:	
(ij noi app	icable, indicate N/A)	
· · · · · · · · · · · · · · · · · · ·		
	· · · · · · · · · · · · · · · · · · ·	

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)	
(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 w document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ 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 4/26/2017	
Signature Monday	
(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)	
$\Delta \Lambda = 0$	
Marh Solt Z (Typed or printed name of person signing)	
Presiden + (Title of person signing)	
(Title of person signing)	