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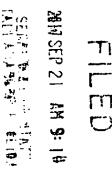
(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
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(De	ocument Number)	
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SEP 22 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: NOUVELLE ENC	GINES, INC.	
DOCUMENT NUMI	BER:		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Lynn W. Baker		
		Name of Contact Person	n
	Nouvelle		
		Firm/ Company	
	4420 WOODBROOK DR		
		Address	
	MARIANNA FL 32446		
		City/ State and Zip Cod	e
horas	hokor5096@amail.com		
- TWINS	baker5986@gmail.com	sed for future annual report	notification)
	15-man address. (to be di	sed for fature annual report	nottication,
For further informatio	n concerning this matter, pleas	se call:	
Lynn W. Baker		at (573-1704
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r 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 (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations a Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

to

NOUVELLE ENGINES, INC.

NOUVELLE ENGINES, INC.		
(Name of Corporation as currently	filed with the Florida Dept. of State	<u>e</u>)
P15000023925		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the	following amendment(s
A. If amending name, enter the new name of the corporation:		
NOUVELLE TECHNOLOGY, INC.		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Oword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation nam	or the abbreviation
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) D. If amending the registered agent and/or registered office address: Name of New Registered Agent		FILEU MAIN
(Florida stre	ret 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 w	ith and accept the obligations of the p	osition.
Signature of New Re	egistered 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 Do	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	one <u>s</u>	
X Add	<u>sv</u>	Sally Sa	nith	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add		_		
Remove				
5) Char				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	icles, enter change(s) (Be specific)			
		<u> </u>		
		_		
		<u> </u>		_
-			_	
·····		<u></u>	- .	
f an amendment provides for an exclusions for implementing the ame	hange, reclassification	, or cancellation of	issued shares,	
(if not applicable, indicate N/A)	IIIIIIIII II WAL COMMINI	KK III (III amendiik	iii idaan	
				_
		<u> </u>		

	SEPTEMBER 19, 2017	
	adoption:	, if other than the
date this document was signed.		
	EPTEMBER 19, 2017	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 50 days after amenament file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	11
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
SEPTEI Dated	MBER 19, 2017	
Signature	Lyn W. Baker	
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)	
	LYNN W. BAKER	
	(Typed or printed name of person signing)	
	DIRECTOR, SECRETARY AND TREASURER	
	(Title of person signing)	