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Office Use Only



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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: MICNOTEK SYSTEMS CORP DOCUMENT NUMBER: P15000035651 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: EDWARD SHLESINGER

Name of Contact Person MICROTEK SYSTEMS CORP 1776 TAMIAMI TRAIL SOUTH

Address

VENICE FL 34293

City/ State and Zip Code CIANTS 4E CO CMAIL, COM
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: FDWARD SHUESINGER at (941) 416-4600

Name of Contact Person Area Code & Daytime Telephone Number 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

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment

to

Artic	les e	of I	ncor	noral	tion
		,, ,			

Articles of incor	грогацов
Microtek 3	1stems Corp
(Name of Corporation as currently	filed with the Florida Dept. of Stale)
P1500003565	- /
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fl its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "cor "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	200
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Stating address MAT BE A POST OFFICE BOX)	
	m - m
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	·
(Florida street	et address)
W D : 1000	m
New Registered Office Address:	, Florida City) (Zip Code)
	<i>,</i> ,
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent.—I am familiar wit	ith and accept the obligations of the position.
Signature of New Reg	gistered Agent, if changing

Check if applicable

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP	ANGELA C. SHLESINGER	8054 LEOPOLD AVE
Add			NOATH DOM FL 34287
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	-		· .
Add			
Remove			
6) Change		_	
Add			
Remove			

	adding additional Articles, enter change(s) here: I sheets, if necessary). (Be specific)
	•
	
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f an amendmen	t provides for an exchange, reclassification, or cancellation of issued shares,
provisions for i	mplementing the amendment if not contained in the amendment itself:
(if not appli	cable, indicate N/A)

.

The date of each amendment(s) a	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirement partment of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes east for the an fficient for approval.	nendment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	2/10/2020	
selecte	rector, president or other officer – if directors or officers have 1, by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)	
	EDWARD SHLESINGER (Typed or printed name of person signing)	
	(Title of person signing)	