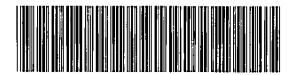
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AUG 1 2 2020 I ALBRITTON COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SUND BIRSTA I	NC.	
DOCUMENT NUMB	P15000032452		
The enclosed Articles (of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	ULRIK HOLMBERG		
-	SUND BIRSTA INC.	Name of Contact Person	
-		Firm/ Company	
	2036 IMESON RD.	23	
-		Address	
_	JACKSONVILLE, FL 32220) 	
		City/ State and Zip Code	•
	ULRIK.HOLMBERG@SUN	OBIRSTA.SE	
•	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
ULRIK HOLMBERG		+1	9048887024
Name o	f Contact Person	Area Coo	9048887024 Je & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depo	rtment of State:
S35 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Ce	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

EFFECTIVE DATE

Articles of Amendment to Articles of Incorporation of

SUND BIRSTA INC.			
(Name)	of Corporation as currently	filed with the Florida Dept, of State	!
P15000092452			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this F	Clorida Profit Corporation adopts the fo	ollowing amendment(s) t
A. If amending name, enter the new na	ame of the corporation:		
NOT APPLICABLE			The new
name must be distinguishable and contain "Inc" or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A	ompany," or "incorporated" or the abb professional corporation name must	reviation "Corp.,"
B. Enter new principal office address, (Principal office address MUST BE A S		NOT APPLICABLE	
	,		2020
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		NOT APPLICABLE	
D. If amending the registered agent ar new registered agent and/or the new	nd/or registered office address:	ess in Florida, enter the name of the	FY 2: 48
	NOT APPLICABLE		
Name of New Registered Agent			
	(Florida stre	ot indirect)	
11 12 13 13 13 13	NOT APPLICABLE		
New Registered Office Address:		. Florida Florida	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the obligations of the po	sition
Therein, weeeps the appointment as regist	erea agem. Tum jummaa n	un ana accept the obligations of the po	311.011.
	Signature of Nove Ro	gistered Agent, if changing	
	organian cog new he	Koneren rigerie, ij erianging	

Check if applicable

☐ 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)

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:

V Mik		
	<u>e Jones</u>	
SV Satis	Smith	
<u>Title</u>	Name	<u>Addres</u> s
T	ANDERS HELLGREN	HEFFNERS ALLÉ 51
		SE-865 33 SUNDSVALL SE
CEO, SI	ULRIK HOLMBERG	2036 IMESON RD.
		STE2
	DETER MARCTERT	JACKSONVILLE, FL 32220
	PETER MARSTEDT	HEFFNRSVAGEN 34
		SE-865 33 SUNDSVALL SE
υ	JOHAN LŌFQVIST	HEFFNERS ALLÉ 51
		SE-865 33 SUNDSVALL SE
С	FABIAN ÖHLUND	HEFFNERS ALLÉ 51
		SE-865 33 SUNDSVALL SE
		<u> </u>
		
	SV Sally Title T CEO, Sf D	SV Satly Smith Title Name T ANDERS HELLGREN CEO, ST ULRIK HOLMBERG D PETER MARSTEDT D JOHAN LÖFQVIST

	(Be specific)
	·
	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
f an amendment provides for an exchiprovisions for implementing the amer	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
f an amendment provides for an exch- provisions for implementing the amer (if not applicable, indicate N'A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
f an amendment provides for an exchiprovisions for implementing the amer (if not applicable, indicate NA)	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing (he amen (if not applicable, indicate NoA)	ange, reclassification, or cancellation of issued shares, udment if not contained in the amendment itself:
If an amendment provides for an exch- provisions for implementing the amer (if not applicable, indicate N/A)	range, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
If an amendment provides for an exch. provisions for implementing the amer (if not applicable, indicate NA)	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing (he amer (if not applicable, indicate N'A)	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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If an amendment provides for an exch provisions for implementing the amed (if not applicable, indicate N'A)	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing (he amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s	s) adoption:	, if other than the
date this document was signed. Effective date if applicable:	2020-06-30	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date via Department of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action a	and shareholder
■ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
☐ The amendment(s) was/were must be separately provided.	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
2020-06	ı-25	
Dated		
Signature	Faso	
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 pointed fiduciary by that fiduciary)	
	Fabian Öhlund	
	(Typed or printed name of person signing)	
	Chairman Sund Birsta Inc. / Chief of Staff Sund Birsta AB	
	(Title of person signing)	