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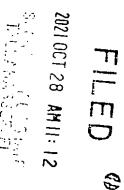
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C. BRUMBLEY NOV 1 0 2021

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: S & P TOIWNG &	RECOVERY SERVICES	INC					
DOCUMENT NUMB	D14000024840							
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.						
Please return all corresp	oondence concerning this ma	tter to the following:						
:	SURUGDEO PERSAUD							
_		Name of Contact Person						
:	S & P TOIWNG & FECOVE	ERY SERVICES INC						
-		Firm/ Company						
	4801 W ROBINSON ST							
-		Address						
1	ORLANDO FL 32811							
-		City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·					
:	SANDTOWGMAIL.COM							
-	E-mail address: (to be us	sed for future annual report	notification)					
For further information	concerning this matter, pleas		O6 ALL THE TIME					
Name o	f Contact Person	Area Code & 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 (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
Amer Divis P.O.	ing Address ndment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303					

Articles of Amendment Articles of Incorporation of

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(Name of Corporation as currently	filed with the Florida Dept. of State)
P16000034849	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.10 $\%$, Florida Statutes, this F its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
S&P TOWING INC	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" A "chartered," "professional association," or the abbreviation "P.A."	
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 <u>MAY BE A POST OFFICE BOX</u>)	2021 OCT 28 A
D. If amending the registered agent and/or registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	. Florida City) Zip Code)
New Registered Agent's Signature, if charging Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position. The gistered Agent, if changing

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)

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	<u> 1.1</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>SV</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Vame</u>	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add		_		
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		· · · · · · · · · · · · · · · · · · ·
Add				
Remove				
6) Change		_		
Add				
Remove				

tach additional sheets, if necessary).	(Re specific)
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an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	numera ii not containica ii viic autenometa resens
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The date of each amendment(s) add date this document was signed.	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date	
	(no more than 90 days after amendment file date	2)
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirement artment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopaction was not required.	ted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	nted by the shareholders. The number of votes cast for the articlent for approval.	nendment(s)
	oved by the shareholders through voting groups. The follow ach voting group entitled to vote separately on the amendme	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
10/26/2021 Dated Signature	Suba Real	
	ector, president or other officer - if directors or officers have	
	by an incorporator – if in the hands of a receiver, trustee, or d fiduciary by that fiduciary)	other court
• •	SURUGDEO PERSAUD	
_	(Typed or printed name of person signing)	
(DWNER/PRESIDENT	
-	(Title of person signing)	***************************************