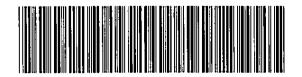
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COVER LETTER

FILING CANCELLED DUE TO RETURNED CHECK

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Ciao Technologies In	nc.				
DOCUMENT NUMBER: P17000036444					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Richard Harrison					
	lame of Contact Person				
Ciao Technologies Inc.					
	Firm/ Company				
265 South Federal Highway #236					
Address					
Deerfield Beach, FL 33441					
City/ State and Zip Code					
sales@ciaotechnologies.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Richard Harrison	at () 597-6109				
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:					
Certificate of Status (S43.75 Filing Fee & Certified Copy Certificate of Status Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)				

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Street Address

Amendment Section
Division of Corporations
Clifton Building

Articles of Amendment Articles of Incorporation

FILING CANCELLED DUE TO RETURNED CHECK

Ciao Technologies Inc.				
(<u>Name</u>	of Corporation as currently	filed with the Florida De	ot. of State)	
P17000036444				
	(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this F	loridu Profit Corporation :	adopts the following a	imendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
name must be distinguishable and con "Corp.," "Inc.," or Co" or the design word "chartered," "professional associa	nation "Corp," "Inc," or "Co	o". A professional corpo-	porated" or the abbi	
B. Enter new principal office address, (Principal office address MUST BE A S				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			50 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1	2019 AUG 14 AM
D. If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the na	me of the	<u>တ</u> <u>သ</u>
Name of New Registered Agent	Richard Harrison			
	(Florida stree 265 S. Federal Highway #23)	•	33441	
New Registered Office Address:	(City)		_, Florida	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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)

Remove

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 Doc FILING CANCELLED DUE TO RETURNED CHECK X Remove $\underline{\mathsf{V}}$ Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Type of Action <u>Title</u> **Name** Address. (Check One) Pres. FILPPULA, CAROLINA 5379 LYONS ROAD i) ____ Change COCONUT CREEK, FL 33073 ___ Add Remove Pres. Harrison, Richard 265 South Federal Highway #236 2) ____ Change Deertield Beach, FL 33441 __ Add __ Remove 3) ____ Change ____ Add __ Remove 4) ____ Change __ Add Remove 5) ____ Change ____ Add __ Remove 6) ____ Change ___ Add

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Attach additional sheets, if necessary).	
	(Be specific)
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provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, udment if not contained in the amendment itself:
f an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, udment if not contained in the amendment itself:
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	08/12/2019	
The date of each amendment(s) a date this document was signed.	loption:	, if other than the
·		
Effective date if applicable:	(up mone than 00 days	after amendment file date)
	(no more than 90 aays t	ijter amenament jite aate)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable stapartment of State's records.	atutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The numbe fficient for approval.	r of votes cast for the amendment(s)
☐ The amendment(s) was/were approvided for must be separately provided for	proved by the shareholders through vo each voting group entitled to vote sep	ting groups. The following statement parately on the amendment(s):
	for the amendment(s) was/were suffic	
by	(voting group)	,"
-	(voting group)	
	pted by the board of directors withou	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without sha	reholder action and shareholder
08/12/20	9 (FILING CANCELLED
DatedSignature		DUE TO RETURNED CHECK
(By a d	rector, president or other officer - if of the day of the first of the hands and fiduciary by that fiduciary)	
	Richard Harrison	
	(Typed or printed name of	person signing)
	Pres.	
	(Title of perso	n signing)