

| (Re | equestor's Name) | |
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| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bı | usiness Entity Nan | ne) |
| (Do | ocument Number) | - |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | RATION: THRUST TECH A | ACCESSORIES INC | | |
|-------------------------|---|--|--|--|
| DOCUMENT NUMI | D17000055433 | | | |
| The enclosed Articles | of Amendment and fee are st | ibmitted for filing. | | |
| Please return all corre | spondence concerning this ma | atter to the following: | | |
| | Albert Corrada | | | |
| | | Name of Contact Person | n | |
| | Albert Corrada CPA | | | |
| | | Firm/ Company | | |
| | 2655 LeJeune Road Suite 90 | | | |
| | | Address | | |
| | Coral Gables, FL 33134 | , | | |
| | | City/ State and Zip Cod | e | |
| | u do Øe ame de en e ev vi | | | |
| | ada@corradacpa.com | sed for future annual report | natification) | |
| | E-mail address, (to be u | sed for future annual report | normeation) | |
| For further information | n concerning this matter, plea | se call: | | |
| Albert Corrada | | at (| 804-8569 | |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check fo | r the following amount made | payable to the Florida Depo | artment of State: | |
| ■ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| | ling Address | | Address | |
| | sion of Corporations | Amendment Section Division of Corporations | | |
| P.O. | Box 6327 | Clifton | Building | |
| Talls | ahassee, FL 32314 | 2661 E | Executive Center Circle | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

THRUST TECH ACCESSORIES INC.

| (Name of Corporation as curren | tly filed with the Florida Dept. of State) | | | |
|---|--|--|--|--|
| P17000075433 | | | | |
| (Document Number | of Corporation (if known) | | | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation: | s Florida Profit Corporation adopts the following amendment(s. | | | |
| A. If amending name, enter the new name of the corporation: | | | | |
| name must be distinguishable and contain the word "corporati "Corp" "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must contain the | | | |
| B. Enter new principal office address, if applicable: | 6701 B NW 12 Ave | | | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | Ft Lauderdale, FL 33309 | | | |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | 6701 B NW 12 Ave | | | |
| | Ft Lauderdale, FL 33309 | | | |
| D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address | | | | |
| | | | | |
| tFlorida s | treet address) | | | |
| New Registered Office Address: | | | | |
| | (City) (Zip Code) | | | |
| New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian | 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)

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: <u>N</u> Change | <u>PT</u> | John Do | <u>ne</u> | |
|-------------------------------|-----------------|--------------|-------------|-----------------|
| X Remove | \underline{Y} | Mike Jo | <u>ones</u> | |
| X Add | <u>sv</u> | Sally S | <u>mith</u> | |
| Type of Action (Check One) | <u>Title</u> | | <u>Name</u> | <u>Addres</u> s |
| 1) Change | | - | | |
| Add | | | | |
| Remove | | | | · |
| 2) Change | | | | |
| Add | | _ | | |
| Remove | | | | |
| 3) Change | | | | |
| Add | | _ | | |
| Remove | | | | |
| | | | | |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
| Add | | _ | | |
| Remove | | | | |
| | | | | |
| 6) Change | | _ | | |
| Add | | | | |
| Remove | | | | |

| | 9. – (Be specifi | c) | | | |
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| f an amendment provides for an ex | cchange, reclas | sification, or can | cellation of issue | d shares, | |
| provisions for implementing the ar (if not applicable, indicate N/A) | nendment if no | ot contained in th | <u>e amendment its</u> | <u>elf:</u> | |
| — (ң поғаррисары, тақсағе ма) | | | | | |
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| The date of each amendment(s) adoption: | , if other than th |
|--|-----------------------------|
| date this document was signed. | |
| Effective date if applicable: (no more than 90 days after amendment file date) | |
| (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this da document's effective date on the Department of State's records. | te will not be listed as th |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s by the shareholders was/were sufficient for approval. | ;) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stateme must be separately provided for each voting group entitled to vote separately on the amendment(s): | nt |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by | |
| (voting group) | |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required. | r |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. | |
| 12/20/2017 Dated | |
| | |
| Signature Sanly Auril | |
| (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other counappointed fiduciary by that fiduciary) | t |
| STANLEY KOWLESSAR | |
| (Typed or printed name of person signing) | |
| PRESIDENT | |
| (Title of person signing) | |