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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Dependable Packa	ging Solutions.	South, Inc.		
DOCUMENT NUMI	P18000008310				
The enclosed Articles	of Amendment and fee are su	bmitted for fili	ng.		
Please return all corre	spondence concerning this ma	tter to the follo	wing:		
	Andrew S. Atkins, Esq.				
	Name of Contact Person				
	Shevlin & Atkins				
		Firm/ (Company		
	1111 Kane Concourse, Sutie	619			
		Ad	dress		
	Bay Harbor Islands, FL 3315	4			
		City/ State	and Zip Cod	e	
		·	·		
andre	w@shevlinatkins.com	·			
	E-mail address: (to be us	sed for future a	nnual report	notification)	
For further informatio	n concerning this matter, pleas	se call:			
Andrew Atkins		at f	305	868-0304	
Name	of Contact Person	ui (de & Daytime Telephone Number	
Enclosed is a check fo	or the following amount made	payable to the	Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fi Certified ((Additional enclosed)	Copy 1 copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Maj	iling Address		Street	Address	
	endment Section ision of Corporations		Amendment Section		
	Division of Corporations				
P.O. Box 6327			Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Dependable Packaging Solutions South, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P18000008319 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co., " or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "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 MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (Zip Code) (City) 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)

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 Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>\$V</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	D	Floyd A. Leach, III	21180 SW 38th Street	
Add			Homestead, FL 33167	
X Remove				
2) Change	D	Michael Chow	300 N. Krome Avenue	
X Add			Building#5	
Remove			Florida City, FL 33034	
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		<u> </u>		
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)	
		
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f an arrandment annuides for an each	and realization or consultation of ignus	od abarrae
provisions for implementing the ame	ange, reclassification, or cancellation of issue ndment if not contained in the amendment its	self:
(if not applicable, indicate N/A)		

the date of each amendment(s) adoption:	, if other than th
date this document was signed.	
Effective date if applicable:	
(no more th	an 90 days after amendment file date)
	onlicable statutory filing requirements this day will and the statutory
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders, by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitled	through voting groups. The following statement to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/	were sufficient for approval
by	n
by(voting group)	•
☐ The amendment(s) was/were adopted by the board of direct action was not required.	ors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators vaction was not required.	vithout shareholder action and shareholder
DatedSignatureSure	<u> </u>
(By a director, president or other o selected, by an incorporator – if in appointed fiduciary by that fiducia	fficer – if directors or officers have not been the hands of a receiver, trustee, or other court ry)
Daniel Petrucci	
(Typed or printe	ed name of person signing)
President	
(Tit	e of person signing)