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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: CRYPTOWEAR	CO. INC				
DOCUMENT NUMBER: P18000011258	,				
The enclosed Articles of Amendment and fee are:	submitted for filing.				
Please return all correspondence concerning this n	natter to the following:				
ROSA ESTELA MORALI	ES .				
	Name of Contact Person	n			
AXIOM ACCOUNTING.	PA				
	Firm/ Company				
4951 TAMIAMI TRAIL N	4951 TAMIAMI TRAIL NORTH SUITE 103				
	Address				
NAPLES, FL 34103					
	City/ State and Zip Cod	e			
estelamorales07@comcast.net					
<del>-</del>	used for future annual report	notification)			
· · · · · · · · · · · · · · · · · · ·	•	,			
For further information concerning this matter, ple	ease call:				
ROSA ESTELA MORALES	at (	777-2943			
Name of Contact Person	at ( Area Co	) de & Daytime Telephone Number			
Enclosed is a check for the following amount mad	e navable to the Florida Dena	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)			
Mailing Address		Address			
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building				
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Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

CRYPTOWEARCO, INC	
(Name of Corporation as current P18000011258	ntly filed with the Florida Dept. of State)
	of Corporation (if known)
	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: N/A	The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	15275 COLLIER BLVD
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	SUITE 201-310
	NAPLES, FL 34119
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	15275 COLLIER BLVD
	SUITE 201-310
	NAPLES, FL 34119
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office address N/A  Name of New Registered Agent	dress in Florida, enter the name of the sss:
(Florida s	treet address)
New Registered Office Address:	City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian  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>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove			
3 ) Change		N/A	
Add			<del></del>
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add	-		
Remove			
		N// h	
6) Change		N/A	<del></del>
Add			
Remove			

	adding additional Articles, enter change(s) here: al sheets, if necessary). (Be specific)
	in one case of the operator
	<del></del>
	<del></del>
	·
	<del></del>
6	
nervisions for	nt provides for an exchange, reclassification, or cancellation of issued shares, implementing the amendment if not contained in the amendment itself:
(if not app	licable, indicate N/A)
(9 арр.	iculate, maiotate (1971)

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :  (no more than 90 days after amendment file	
tho more than 90 days after amenament fits	e aare)
Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	ne amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The formust be separately provided for each voting group entitled to vote separately on the ame	
"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 action was not required.	and shareholder
■ The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	shareholder
Dated OT/09/2018 Signature Danil Occupeta	
(By a director, president or other officer – if directors or officers selected, by an incorporator – if in the hands of a receiver, truste appointed fiduciary by that fiduciary)	
DANIEL ZABALETA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	