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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: ELECTRIC PLANTS VENEZUELA CA INC DOCUMENT NUMBER: P18000018307 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: FRANCISCO J ESCALONA SOTO Name of Contact Person ELECTRIC PLANTS VENEZUELA CA INC Firm/ Company 9737 NW 41 ST., STE. 1054 Address **DORAL, FL 33178** City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786) 925-6957

Area Code & Daytime Telephone Number FRANCISCO J ESCALONA SOTO Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

H190000 614373

Articles of Amendment to Articles of Incorporation

ELECTRIC PLANTS VENEZUELA CA INC		
(Name of Corporatio	n as currently filed with the Florida Dept. of State)	
P18000018307		
(Docume	ent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s	3) ta
A. If amending name, enter the new name of the cor	poration:	
N/A	The new	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co" or the designation "Corp., word "chartered." "professional association." or the designation.	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD		
(Trincipal office damess most be A STREET ADDI		
·.	<u>ه</u> م. من	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	N/A	
(Mutting uttaress MAT BE A FOST OFFICE BOX		77
		[7]
D. If amending the registered agent and/or registere	defferent defense in Florida and the second second	
new registered agent and/or the new registered o		
Name of New Registered Agent N/A	عَ ن	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered agent. I hereby accept the appointment as registered agent. I	tered Agent: am familiar with and accept the obligations of the position.	
Signal	ure of New Registered Agent, if changing	

Page 1 of 4

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>PT</u>	John Doe				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>\$V</u>	Sally Sn	nith			
Type of Action (Check One)	<u>Title</u>		Name	Address		
l) Change	VP	_	FEDERICO N ESCALONA	9737 NW 41 ST., STE. 1054		
Add				DORAL, FL 33178		
X Remove						
2) Change		~				
Add						
Remove						
3) Change		_ -				
Add						
Remove						
4) Change		_				
Add						
Remove						
5) Change		_				
Add						
Remove				· — - · · · · · · · · · · · · · · · · ·		
6) Change		_				
Add		-				
Remove						

Page 2 of 4

 If amending or adding additional Art (Attach additional sheets, if necessary). 	ticles, enter change(s) here: (Be specific)
√A/A	
· · · · · · · · · · · · · · · · · · ·	
F. If an amendment provides for an exc provisions for implementing the am- (if not applicable, indicate N/A) N/A	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
	

Page 3 of 4

	02/22/2019	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Of Effective date if applicable:	2/28/2019	
enecave onte <u>it applicanie.</u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this datepartment of State's records.	ite will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s sufficient for approval.	s)
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholde dopted by the incorporators without shareholder action and shareholder	: T
02/22/20 Dated	19	
Dated		
Signature	farala	
(By a selec	director, president or other officer – if directors or officers have not been æd, by an incorporator – if in the hands of a receiver, trustee, or other cour med fiduciary by that fiduciary)	t
	FRANCISCO J ESCALONA SOTO	
	(Typed or printed name of person signing)	
	P	
	(Title of person signing)	