P18000035030

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Alpha Fee Corp.		
DOCUMENT NUME	BER: P18000035030		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Marcos del Cristo		
		Name of Contact Perso	n
	AlphaTec Corp.		
		Firm/ Company	
	17941 SW 115TH AVE		
		Address	
	Miami, Fl. 33157		
		City/ State and Zip Cod	e
mdak	cristo@alphatec.us		
	• .	sed for future annual report	natification)
	o man address, (to be a	sea for factore annual report	Hottication
For further information	concerning this matter, pleas	se call:	
Marcos del Cristo		at (982-7391
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	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)
Ame Divi: P.O.	ling Address Indment Section Ission of Corporations Issox 6327 Ishassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



AlphaTec Corp.	
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P18000035030	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s 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 "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office addres	<u>is:</u>
Name of New Registered Agent N/A	
(Florida si	treet address)
New Registered Office Address:	, Florida N/A
new Registered Confee Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	
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 Do	<u>oe</u>	
X Remove	Y	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change	СМО	_	Duilio Torrese	5700 W 14TH CT
Add				HIALEAH, FL 33012
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		~ -		
Add				
Remove				
6) Change		_		
Add				
Remove				

	(Be specific)
7/A	
	- 140 m.1
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The data of each accordance (a) a	N/A	, if other than the
The date of each amendment(s) a date this document was signed.	паорион:	, if other man the
. N/A	4	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<u></u>
	(110 110 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ad action was not required.	lopted by the incorporators without shareholder action and shareholder	
2018/05/1	4	
Dated		
	2:10	
Signature(By a	director, president or other officer – if directors or officers have not been	
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court	
арроі	nted fiduciary by that fiduciary)	
	Marcos del Cristo	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	