P18000040649

(Rec	juestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Name	?)
(Doc	cument Number)	
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Special Instructions to F	iling Officer:	

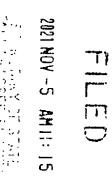
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A. RAMSEY NOV 2 3 2021

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: <u>CROMOX</u>	, CORP		
DOCUMENT NUMBE	CR: P18000040649)		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	utter to the following:		
	N	oemi Berrios-Amaro		
_	•	Name of Contact Person	n	
	N&S Multiservices, Inc, Firm/ Company			
_				
	2005 W Cypress Creek Road, Suite 104B			
_	Address			
_	Fort Lauderdale, FL 33309			
		City/ State and Zip Cod	e	
	ns	smultiservicesinc@gma	iil.com	
_	E-mail address: (to be u	sed for future annual report	notification)	
	concerning this matter, plea		. 258-7218	
Noemi Berrios-Amaro Name of Contact Person		at (at (de & Daytime Telephone Number	
	he following amount made			
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	

Articles of Amendment to Articles of Incorporation of

FILED

CROMOX CORP

2021 NOV _ =

	CROMOA, CORP.		MULLO
(Name of C	orporation as currently filed w		
	P18000040649	74 () 5 ()	F. 57.47.
-	(Document Number of Corpora		, , , , , , , , , , , , , , , , , , ,
rsuant to the provisions of section 607.100 Articles of Incorporation:	6, Florida Statutes, this <i>Florida I</i>	Profit Corporation adopts the fo	llowing amendment
If amending name, enter the new name	of the corporation:		
			The new
ame must be distinguishable and contain the lnc.," or Co.," or the designation "Corp chartered," "professional association," or	o," "Inc," or "Co". A profess	or "incorporated" or the abbitional corporation name must	reviation "Corp.," contain the word
Enter new principal office address, if a	pplicable:		
rincipal office address <u>MUST BE A STRI</u>	EET ADDRESS)		
		ar w	
. Enter new mailing address, if applicab			
(Mailing address MAY BE A POST OF)	FICE BOX)		·
			
. If amending the registered agent and/o		orida, enter the name of the	
new registered agent and/or the new re	gistered office address:		
Name of New Registered Agent		·	
	(Florida street addres	s)	
New Registered Office Address:		, Florida	
The Market of the Individual Control of the	(City)		(Zip Code)
New Registered Office Address:	(City)	, Florida	(Zip Code)
ew Registered Agent's Signature, if chan hereby accept the appointment as registered		accept the obligations of the po	sition.
teren, accept the appointment all registered	· uaconi.	ecept the conganous by the pos	,,,,,,,,
	Signature of New Registered	Agent, if changing	
heck if applicable			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	VP	GUSTAVO A. ZAMBRANO, SR.	4852 N SR 7, Apt. 104 Coconut Creek, FL 33073
Add Remove			4952 N.S.D. 7. Apt. 104
2) Change X Add	<u>P</u>	GUSTAVO A. ZAMBRANO, JR.	4852 N SR 7, Apt. 104 Coconut Creek, FL 33073
Remove 3) Range Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	<u></u>
<u> </u>	
lf an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
and the second s	
(if not applicable, indicate N/A)	

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file	date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing require epartment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
▼ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sh	areholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the officient for approval.	e amendment(s)
	proved by the shareholders through voting groups. The following group entitled to vote separately on the amend	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
selecte	rector, president or other officer – if directors or officers he down an incorporator – if in the hands of a receiver, trustee ted fidurary by that fiduciary)	
	GUSTAVO A. ZAMBRANO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	-