

(Req	uestor's Name)	
(Add	ress)	
bbA)	ress)	
(City	/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	e)
(Ďoc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	,

Office Use Only



700321591817

12/13/18--01005--020 ••3%,50

HILED 18 DEC 13 PM 4:5

DEC 1 8 2019
S. YOUNG

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPO	RATION: EZ PIXEL CORP		
DOCUMENT NUM	BER: P18000047623		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	PAULO GOMES		
		Name of Contact Perso	n
	GOMES INSURANCE & A	CCOUNTING	
		Firm/ Company	
	129 SW 15TH STREET		
		Address	
	DEERFIELD BEACH FL 33	3441	
		City/ State and Zip Cod	c
PAU	LO@GOMESINS.COM		
•	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
	, , , , , , , , , , , , , , , , , , ,		
PAULO GOMES		at (531-1451
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 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 endment Section sion of Corporations Box 6327 chassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

EZ PIXEL CORP

(Name of Corporation	on as currently filed with the Florida Dept. of State)
P18000047623	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:
	The new
	d "corporation," "company," or "incorporated" or the abbreviation ," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.)	<u>X</u>) = 5 6
D. If amending the registered agent and/or register new registered agent and/or the new registered of the new	
Name of New Registered Agent	55 55
	(Florida street address)
New Registered Office Address:	(City), Florida (Zip Code)
Name Barrian and A. and Circum at Circum at Circum	
New Registered Agent's Signature, if changing Region hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position.
Signo	ature 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 Doc	
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>	Address
1) Change	VP	MAX NASCIMENTO JUNIOR	8433 NW 1ST ST
X Add			CORAL SPRINGS FL 33071
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
-			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(3	

	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file dat	(e)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirement partment of State's records.	nts, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the an	nendment(s)
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The follows each voting group entitled to vote separately on the amendment	ing statement ent(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and share	eholder
12/06/2018 Dated	-	
Signature		
selected appoint	rector, president or other officer – if directors or officers have d, by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary) JUSSIE SOARES	
	(Exped or printed name of person signing)	
	PRESIDENT	

(Title of person signing)