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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Teflon Customs, II	NC.				
DOCUMENT NUM	P18000067001					
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	itter to the following:				
	Ramon A Vargas					
		Name of Contact Person	n			
	Teflon Customs, INC.					
		Firm/ Company				
	928 NW 1st					
		Address				
	Fort Lauderdale., FL 33311					
		City/ State and Zip Cod	e			
	peter@peterberkmanlaw.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call:				
Peter Berkman		at (⁸¹³	600-2971			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	or 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)	Certificate of Status Certified Copy (Additional Copy is enclosed)			

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee

Articles of Amendment Articles of Incorporation

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(Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," 'Inc.," or "Co.," or the designation "Corp.," 'Inc.," or "Co.," A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Port Lauderdale, FL 33311 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or registered office address: Name of New Registered Agent S230 Land O Lakes Blvd #431 (Florida street address) Land O Lakes Land O Lakes Land O Lakes Florida (City) (City) (City) (Jic Code)	Teflon Customs, INC				
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.," A professional corporation name must contain the word "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Fort Lauderdale, FL 33311 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Page NW 1st Fort Lauderdale, FL 33311 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered address: Name of New Registered Agent [5230 Land O Lakes Blvd #431] [Florida street address] New Registered Office Address: Land O Lakes Land O Lakes Florida 34639	(Name	of Corporation as currentl	y filed with the Florida Dept. of Stat	<u>e</u>)	
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(City) (Zip Code)	New Registered Office Address:		, Florida		
			(City)	(Zip Code)	
	New Registered Agent's Signature, if c	hanging Registered Agent:			
New Registered Agent's Signature, if changing Registered Agent:				osition.	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.					
		Signature of New Re	raistered Agent if changing		
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		organism e ty from the	Same to rigerit, y enunging		
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I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	in the amenument(s) is/are being filed p	ursuani to 8, 007,0120 (11) (v), r.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)

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	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	Zeppoli Holdings Trust LLC	5230 Land O Lakes Blvd #431
Add			Land O Lakes, FL 34639
	SD	Peter Berkman, Esq	5230 Land O Lakes Blvd #431
X Add			Land O Lakes, FL 34639
Remove 3) Change			
Add			
Remove			
4) Change			
Add			-444
Remove			
5) Change	<u> </u>		
Add			
Remove			
6) Change			
Add			
Remove			

	heets, if necessary). (Be specific	hange(s) here: c)			
						
						
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an amendment provisions for important (if not applica	olementing the ar	mendment if no	sification, or car ot contained in t	cellation of issue	d shares, self:	

The date of each amendment(s) acd date this document was signed.	option:	, if other than the
_		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file a	late)
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirer partment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the ficient for approval.	amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amend	owing statement ment(s):
"The number of votes east: Board of Directors by	or the amendment(s) was/were sufficient for approval	
	(voting group)	
selected	ector, president or other officer – if directors or officers ha by an incorporator – if in the hands of a receiver, trustee.	
	d fiduciary by that fiduciary)	
1	Peter Berkman	
-	(Typed or printed name of person signing)	
!	Director	
-	(Title of person signing)	