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SECRETARY OF STATE

AUG 2 2 2018 T. LEWIEUK

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Heather Franklin Name of Contact Person Werx, INC. Peter Island douc ST. Augustine FL. 32092 City State and Zip Code Werking, Florence (cross), com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kcith Franklin Name of Contact Person at (470) 533-6170 Area Code & Davtime Telephone Number 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 Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

Werx Inc
(Name of Corporation as currently filed with the Florida Dept. of State)
P130000163209
(Document Number of Corporation (if known) 2019 ABG 15 P 1 51
Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation: TALLAHASSEE, FLORIDA
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)
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 office address:
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 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 Doe					
X Remove	<u>V</u>	Mike Jones					
X Add	\underline{SV}	Sally Smith					
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s				
1) Khange	<u> P</u>	Brandon K. Franklin	13 Peter Ishnodruc				
Add			ST. Augustine, Fl 32692				
Remove							
2) Change Add	P	Heather C. Franklin	13 Peter Island draw. ST. Augustie, Fl 32692				
Remove 3.1 Change Add	<u>SD</u>	Brandon K. Franklin	13 Peter Iskad drive St. Augustine, Fl. 32092				
Remove							
4) Change							
Remove							
5) Change							
Add							
Remove							
6) Change							
Add							
Remove							

	heets, if necessary).	(Be specific)			
					
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c	orovides for an excl	hange, reclassificat	ion, or cancellation o	of issued shares,	
i an amendment p	alamanting the ame	endment if not cont	ained in the amendn	nent itself:	
provisions for imp	brementing the aine				
provisions for imp	ble, indicate N/A)				
provisions for imp	ble, indicate N/A)				
provisions for imp	ble, indicate N/A)				
provisions for imp	ble, indicate N/A)				
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provisions for imp	ble, indicate N/A)				
provisions for imp	ble, indicate N/A)				
provisions for imp	ble. indicate N/A)				
provisions for imp	ble, indicate N/A)				

The date of each amendment(s) adoption:	if other than the
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date widocument's effective date on the Department of State's records.	ll not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
L (the amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
Let The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated August 12,2019 Signature Brandon K. Franklin	
Signature (By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Brandon K. Francis N (Typed or printed name of person signing)	
Secretary Director (Title of person signing)	
(Title of person signing)	