## P18000079709

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Hurstorm CORP.			
DOCUMENT NUM	BER: P18000079709			
	of Amendment and fee are su	abmitted for filing.		
Please return all corre	espondence concerning this ma	atter to the following:		
	Alfredo Miranda			
		Name of Contact Perso	n	
	Hurstorm			
		Firm/ Company		
	1283 SUMMIT RUN CIR			
		Address	177.	
WEST PALM BEACH 33415				
		City/ State and Zip Cod	e	
		only, base and my own	-	
a.mii	randa@engineer.com			
	E-mail address: (to be u	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
Alfredo Miranda		787	6671588	
	of Contact Person	at ( <sup>787</sup>	de & Daytime Telephone Number	
Name	of Confact Person	Area Co	de & Dayinne Telephone Number	
Enclosed is a check for	or 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)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address		Street	Address	
	endment Section	Amendment Section		
	ision of Corporations	Division of Corporations		
	). Box 6327 Jahassee, FL 32314	Clifton Building 2661 Executive Center Circle		
ı aı	IMHASSUC, FL DZD14	2001 E	Accurac Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Hursturm corp.				
(Name	of Corporation as currer	otly filed with the Florida Dept. of State)		
P18000079709				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, the	is Florida Profit Corporation adopts the following	ng amendi	nent(s) to
A. If amending name, enter the new n	ame of the corporation:			
Hurstorm CORP.			The no	ew
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	ion," "company," or "incorporated" or the c "Co". A professional corporation name must "P.A."	ubbreviati	on
B. Enter new principal office address,	if annlicable:	N/A		
(Principal office address MUST BE A S			•	-
			<del></del>	- 54
C. Enter new mailing address, if appl	icable:		S	
(Mailing address MAY BE A POST		N/A	- <del></del> 1	- "
			(J)	د به. د م
			:3	* 레뉴
			<u>့ သု</u>	- 4
D. If amending the registered agent ar new registered agent and/or the ne			\$?	
Name of New Registered Agent	N/A			
Name of New Acquisicrea Agent	N/A		_	
	(Florida :	street address)	_	
	N/A N/A			
New Registered Office Address:		(City) Florida (Zip	Code)	-
New Registered Agent's Signature, if c I hereby accept the appointment as regist		nt: r with and accept the obligations of the position.		
	Signature of New	Registered Agent, if changing		
		7		

## 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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) N/A Change	N/A	N/A 	N/A
N/A Add			N/A
N/A Remove			N/A
2) N/A Change	N/A	N/A	N/A
Add			
Remove			<del> </del>
3) N/A Change	N/A	N/A	N/A
Add			
Remove			
4) N/A Change	N/A	N/A	N/A
Add			
Remove			
5) N/A Change	N/A	N/A	N/A
Add			
Remove			
6) N/A Change	N/A	N/A	N/A
Add			
Remove			

If amending or adding additional Article (Attach additional sheets, if necessary).	
/A	
<del></del>	
If 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:
(if not applicable, indicate N/A)	
/A	

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendm sufficient for approval.	ent(s)
	pproved by the shareholders through voting groups. The following states or each voting group entitled to vote separately on the amendment(s):	lement
"The number of votes car	st for the amendment(s) was/were sufficient for approval	
by N/A		
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and sharel	nolder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	ा
9/25/2018 Dated/ Signature//	Alle	
(Bý a selec	director, president or other officer – if directors or officers have not beed, by an incorporator – if in the hands of a receiver, trustee, or other need fiduciary by that fiduciary)	
	Alfredo Miranda	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	. ,.