P19 0000 22659

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u></u>
(Cit	y/State/Zip/Phone	= #)
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(Bu	siness Entity Nar	ne)
	_	
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	STRATIS AI INC	;	•	
•	P19000022659			
The enclosed Articles of Amer	ndment and fee are su	ibmitted for filing.		
Please return all corresponden	ce concerning this ma	itter to the following:		
ANTO	ONIO DOWELS			
	·	Name of Contact Person	n	
		Firm/ Company		
4798 :	4798 S FLORIDA AVE STE 127			
	Address			
LAKE	ELAND, FL 33813			
		City/ State and Zip Cod	e	
ANTONIO(@STRATIS.AI			
E-	nail address: (to be us	sed for future annual report	notification)	
For further information concer	ning this matter, pleas	se call:		
ANTONIO DOWELS		at (
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for the fol	lowing amount made	payable to the Florida Depa	artment of State:	
	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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

STRATIS ALINC	
(Name of Corp.	oration as currently filed with the Florida Dept. of State)
P19000022659	299 KAY 20 ₱ 13 3 4
(D	Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of t	the corporation:
	The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," o	word "corporation," "company," or "incorporated" or the abbreviation Corp," "Inc," or "Co". A professional corporation name must contain the or the abbreviation "P.A."
B. Enter new principal office address, if applied (Principal office address MUST BE A STREET)	
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>E BOX</u>)
D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered.	gistered office address in Florida, enter the name of the ered 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 hereby accept the appointment as registered age	t Registered Agent: ent. 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	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	DUSTIN BAKER	
Add _X Remove			
2) Change	D	KRISTEN GILLETT	
Add _X Remove			
3) Change	D	ANTONIO DOWELS	
Add Remove			
4) Change	D	JUSTIN DONORUE	
Add X Remove			
5) Change	D	ANTHONY NELSON	
Add _X Remove			
6) Change	P/CEO	BRITTANY SHELL	4798 S FLORIDA AVE STE 127
X Add			LAKELAND, FL 33813
Remove			

	dding additional Arti l sheets, if necessary).	(Be specific)			
					
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f an amendmen	t provides for an exch	ange, reclassifica	tion, or cancellat	ion of issued sha	res,
tifnot appli	mplementing the ame cable, indicate N/A)	<u>ndment if not con</u>	tained in the am	endment itself:	
(у пот аруп	saore, marcare ivis)				
	<u></u>				
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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 block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	e amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The fold must be separately provided for each voting group entitled to vote separately on the amen	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action action was not required.	and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and s action was not required.	shareholder
05/15/19 Dated	
(By a director, president or other officer – if directors or officers is selected, by an incorporator – if in the hands of a receiver, trustee	
appointed fiduciary by that fiduciary)	, or other court
ANTONIO DOWELS	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	