P19000029467

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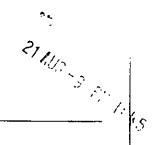
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: NYQUIST INGEN	HERIA, INC		
	MBER: P19000029667			
	es of Amendment and fee are su	bmitted for filing.		
Please return all cor	respondence concerning this ma	tter to the following:		
	SAID ARGUELLO			
		Name of Contact Person	n	
	NYQUIST INGENIERIA, IN	IC		
		Firm/ Company	·····	
	8425 NW 41ST ST APT 153			
		Address		
	DORAL, FL 33166			
		City/ State and Zip Cod	e	
	nyquist.ing@hotmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informat	ion concerning this matter, pleas	se call:		
FRANCISCO ARGUELLO		at (789 4400	
Nam	e of Contact Person		de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ailing Address		Address	
	mendment Section ivision of Corporations		Amendment Section Division of Corporations	
P.O. Box 6327			entre of Tallahassee	
Tallahassee, FL 32314			N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



NYQUIST INGENIERIA, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P19000029667 (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) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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." 8425 NW 41ST ST APT 153 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) DORAL, FL 33166 C. Enter new mailing address, if applicable: 8425 NW 41ST ST APT 153 (Mailing address MAY BE A POST OFFICE ROX) DORAL, FL 33166 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: SAID ARGUELLO Name of New Registered Agent 8425 NW 41ST ST APT 153 (Florido street address) , Florida_ 33166 DORAL New Registered Office Address: (City)

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

Check if applicable

■ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_ <u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	P	RODRIGUEZ, MARIA	8620 NW 64TH STREET UNIT 10
Add			MIAMI, FL 33166
X Remove			
2) Change	P	ARGUELLO, FRANCISCO	8425 NW 41ST ST APT 153
X Add			DORAL, FL 33166
Remove 3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific) (I/A If an amendment provides for an exchange, reclassification, or cancellation	
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If an amendment provides for an exchange, reclassification, or cancellation	
If an amendment provides for an exchange, reclassification, or cancellation	
	of issued shares,
provisions for implementing the amendment if not contained in the amen	iment itself:
(if not applicable, indicate N/A)	
1	
· · · · · · · · · · · · · · · · · · · 	

date this document was sign	
	AUGUST 3RD 2021
Effective date if applicable	
	(no more than 90 days after amendment file date)
Note: If the date inserted document's effective date of	in this block does not meet the applicable statutory filing requirements, this date will not be listed as then the Department of State's records.
Adoption of Amendment((S) (CHECK ONE)
The amendment(s) was/ action was not required.	were adopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/ by the shareholders was	were adopted by the shareholders. The number of votes east for the amendment(s) s/were sufficient for approval.
	were approved by the shareholders through voting groups. The following statement wided for each voting group entitled to vote separately on the amendment(s):
"The number of v	otes cast for the amendment(s) was/were sufficient for approval
by	"
	(voting group)
	JGUST 3RD 2021
Dateu	
Signature	São orialets
•	(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)
	SAID ARGUELLO
	(Typed or printed name of person signing)
	VP
	(Title of person signing)