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S. YOUNG

## COVER LETTER

TO: Amendment Section Division of Corporations

TION: ACRYLICS PLUS	PLASTIC FABRICATION	N INC		
R:				
Amendment and fee are su	bmitted for filing.			
ondence concerning this man	tter to the following:			
D KOTLER				
	Name of Contact Person	1		
TAX ZONE INC				
<del></del>	Firm/ Company			
865 COMMODITY CIRCL	E STE4			
	Address			
RLANDO FL 32819				
	City/ State and Zip Cod	e		
INTANT@TAXZONEFL.	COM			
=		notification)		
`	•	,		
concerning this matter, pleas	e call:			
D KOTLER		888-3131		
Contact Person		de & Daytime Telephone Number		
he following 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		
	P19000032288  "Amendment and fee are su ondence concerning this man D KOTLER  AX ZONE INC  S65 COMMODITY CIRCL.  RLANDO FL 32819  JNTANT@TAXZONEFL.0  E-mail address: (to be use concerning this matter, please concernin	R: P19000032288  **Amendment* and fee are submitted for filing.  Ondence concerning this matter to the following:  D KOTLER  Name of Contact Person  AX ZONE INC  Firm/ Company  865 COMMODITY CIRCLE STE4  Address  RLANDO FL 32819  City/ State and Zip Cod  JNTANT@TAXZONEFL.COM  E-mail address: (to be used for future annual report  concerning this matter, please call:  at (407  Contact Person Area Co  the following amount made payable to the Florida Depayable to the Florida Depayable to the Florida Copy (Additional copy is enclosed)  **Example 1843.75 Filing Fee & Certified Copy (Additional copy is enclosed)  **Example 2843.75 Filing Fee & Certified Copy (Additional copy is enclosed)  **Example 2843.75 Filing Fee & Certified Copy (Additional copy is enclosed)  **Example 2843.75 Filing Fee & Certified Copy (Additional copy is enclosed)  **Example 2843.75 Filing Fee & Certified Copy (Additional copy is enclosed)  **Example 2843.75 Filing Fee & Certified Copy (Additional copy is enclosed)  **Example 2843.75 Filing Fee & Certified Copy (Additional copy is enclosed)  **Example 2843.75 Filing Fee & Certified Copy (Additional copy is enclosed)  **Example 2843.75 Filing Fee & Certified Copy (Additional copy is enclosed)  **Example 2843.75 Filing Fee & Certified Copy (Additional copy is enclosed)  **Example 2843.75 Filing Fee & Certified Copy (Additional copy is enclosed)  **Example 2843.75 Filing Fee & Certified Copy (Additional copy is enclosed)		

## Articles of Amendment to Articles of Incorporation of

ACRYLICS PLUS PLASTIC FABRICATION INC

(Name of Corporation as current)	ly filed with the Florida Dept. of State)			
P19000032288				
(Document Number o	f Corporation (if known)			
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amend	ment(s) to		
A. If amending name, enter the new name of the corporation:				
	The n			
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ' word "chartered," "professional association," or the abbreviation	'Co''. A professional corporation name must contain	ion the		
B. Enter new principal office address, if applicable:	398 CYPRESS KNEE LN			
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	LAKE MARY FI. 32746	_		
		-		
		_		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<del>_</del> •.	<u></u>	
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	<del>.</del>		APR	11
		- ( ,	23	
<ol> <li>If amending the registered agent and/or registered office add new registered agent and/or the new registered office address</li> </ol>	ress in Florida, enter the name of the	<u>.</u>	717 244	۱ · 
Name of New Registered Agent		<u> </u>	ف	
		المراجعة المحاجعة	<u>ء</u> ن	
(Florida sti	reet 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,			
	Design of the second second			
ыўнаште оручы г	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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{v}$	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	S	VICTOR M MIRANDA	900 BOYD RD
XAdd			SUWANNEE GA 30024
Remove			<del> </del>
2) Change		_	
Add			-
Remove			
3 ) Change		_	
Add			
Remove			-
4) Change			
Add			
Remove			
5) Change		_	<u></u>
Add			
Remove			
6) Change		_	
Add			· <del>-</del> · · · · · · · · · · · · · · · · · · ·
Remove			

vitach <i>additional sh</i>	cets, if necessary). (	Be specific)			
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<u>an antenament pr</u> provisions for impl	rovides for an exchang lementing the amenda	<u>ze, reclassificatio</u> nent if not contai	n, or cancellation o ned in the amendn	<u>fissued shares,</u> entitself:	
(if not applicab	le, indicate N/A)				
					-
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	<del></del>		<u></u>	<del></del> .	

The date of each amendment(s)	adoption:, if other than the
late this document was signed.	, –
Effective date if applicable:	(no more than 90 days after amendment file date)
Note: If the date inserted in thi focument's effective date on the	block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.
The amendment(s) wardwere must be separately provided.	pproved by the shareholders through voting groups. The following statement in each voting group entitled to vote separately on the amendment(s):
	st for the ninendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were action was not required.	idopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
04/18/2 Dated	•••
Signature	2 Cm Marine
(By	n director, president or other officer if directors or officers have not been cted, by an incorporator if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	WILLIAM MIRANDA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)