P190000 41576

(Re	equestor's Name)	
(Ad	dress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	= #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ECO FRIENDLY I	INDUSTRIES, INC.	
DOCUMENT NUMB	P19000041576		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	DeAnna Montemayor		
-	···	Name of Contact Person	
	Wyoming Corporate Services	s, Inc.	
-			
	1712 Pioneer Ave		
-	,	Address	
	Cheyenne, WY 82001		
-		City/ State and Zip Code	`
For further information	E-mail address: (to be us	sed for future annual report	
DeAnna Montemayor		at (717-7920
Name o	f Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	filed with the Florida Dept. of State)	
P19000041576		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the follo	wing amendment(s) t
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation." "c "Inc" or Co" or the designation "Corp." "Inc." or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbrev professional corporation name must co	iation "Corp.," ntain the word
	550 North Reo Street Suite 202	_
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	Tampa FL 33609	1020 MAR P.6
		A23
		9
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	550 North Reo Street Suite 202	
(Mailing address MAT BE A POST OFFICE BOX)	Tampa FL 33609	PH 3: D7
D. If amending the registered agent and/or registered office addinew registered agent and/or the new registered office address	ess in Florida, enter the name of the	
new registered agent and/or the new registered office address	ress in Florida, enter the name of the	
D. If amending the registered agent and/or registered office addi- new registered agent and/or the new registered office address Name of New Registered Agent	ess in Florida, enter the name of the	
new registered agent and/or the new registered office address Name of New Registered Agent	ess in Florida, enter the name of the	
new registered agent and/or the new registered office address Name of New Registered Agent	eet address)	Zip Code)

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 = ChiefExecutive 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 1</u>	ohn <u>Doc</u>	
X Remove	<u>V</u> <u>A</u>	like Jones	
X Add	<u>sv</u> <u>s</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	Gerald Pitts	1712 Pioneer Ave. Suite 7000
Add			Cheyenne, WY 82001
X Remove			
2) Change	P	Sidney Garcia	550 North Reo Street Suite 202
$\frac{X}{X}$ Add			Tampa FL 33609
Remove 3) Change	V	Sidney Garcia	550 North Reo Street Suite 202
X Add			Tampa FL 33609
Remove			
4) Change	T	Sidney Garcia	550 North Reo Street Suite 202
X Add			Tampa FL 33609
Remove		6.1	550 North Reo Street Suite 202
5) Change	<u>S</u>	Sidney Garcia	
X Add			Tampa FL 33609
Remove	D	Sidney Garcia	550 North Reo Street Suite 202
δ) Change		- Chancy Sarem	Tampa FL 33609
X Add			- tumpu i i i occos
Remove			

amending or adding additional Ar attach additional sheets, if necessary).	(Be specific)			
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		<u>-</u>	<u>. </u>	
		·		
f an amendment provides for an ex-	change, reclassificat	ion, or cancellati	ion of issued shar	res,
provisions for implementing the an (if not applicable, indicate N/A)	ienament II not com	iaineo in tue amo	andment itsen.	
(3 344				
	· <u>·</u>			
				_

The date of each amendment(s) add	option:		, i	f other than the
date this document was signed.				
Effective date <u>if applicable</u> :				
<u></u> .	(no more	than 90 days after amendme	nt file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the artment of State's rec	applicable statutory filing rords.	equirements, this date will not	be listed as the
Adoption of Amendment(s)	(CHECK ON	<u>E</u>)		
The amendment(s) was/were adopaction was not required.	ted by the incorporate	ors, or board of directors with	out shareholder action and shar	ehol d er
☐ The amendment(s) was/were adop by the shareholders was/were suf	ited by the shareholde	rs. The number of votes cast	for the amendment(s)	
☐ The amendment(s) was/were appr must be separately provided for e	oved by the sharehold ach voting group enti	lers through voting groups. It is the state of the least to vote separately on the	The following statement amendment(s):	
"The number of votes cast f	or the amendment(s)	was/were sufficient for appro	val	
by	(voting group)		."	
March 23, 2 Dated	020	(
selected	ector, president or of , by an incorporator – ed fiduciary by that fi	fer officer – if directors or of if in the hands of a receiver, duciary)	ficers have not been trustee, or other court	
	Gerald Pitts			
	(Typed or	printed name of person signi	ng)	
	Secretary			

(Title of person signing)