P19000060592

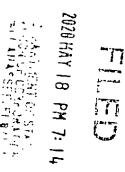
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S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

production of the second

NAME OF CO	ORPORA	TION: EP- ORAM FL CO	DRPORATION	
DOCUMENT	NUMBE	R: P19000060592		
		"A <i>mendment</i> and fee are sul	bmitted for filing	
Please return a	li correspo	ondence concerning this mat	tter to the following:	
	Т	HOMAS KOBE		
	_		Name of Contact Person	n
	K	OBE CONSULTING COF	RP	
			Firm/ Company	
	2	4890 EBRO CT		
	_		Address	
	8	ONITA SPRINGS, FL 341	135	
	_		City/ State and Zip Cod	ני
	К	OBESTB@GMAIL.COM		
			ed for future annual report	notification)
For further into	ormation c	concerning this matter, pleas	se call:	
ULLA KOBE			239 at (258-2071
	Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a c	heck for t	he following amount made p	payable to the Florida Dep	artment of State.
■ \$35 Filing	. Fee	□\$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)
	Amen Divisi P.O. B	ng Address diment Section on of Corporations dox 6327 assec, FL 32314	Ameno Divisio The C 2415 i	Address Intent Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

	_	CORPOR	A T
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EP- ORAM FE CORPORATION			
(Name of Corporation as current P19000060592	ntly filed with the Florida Dept. of State)	-	
	of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the follo	owing amendm	ient(s) ti
A. If amending name, enter the new name of the corporation: MeCoGe CORPRATION		77	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.,1	A professional corporation name must co	The neviolation "Corp., ontain the wor	**
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	₩ : 	20 M	فيأمه
	±	#: '	1 1
		<u>↑∺</u> ————)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	•	경	
(maining address MAT DE A COST OFFICE DOA)		-	
		·	
D. <u>If amending the registered agent and/or registered office ad-</u> new registered agent and/or the new registered office addre	ldress in Florida, enter the name of the		
Name of New Registered Agent	·		
			
#Florida .	street address)		
New Registered Office Address:	, Florida		
	(City)	(Zīp Coder	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia	nt: r with and accept the obligations of the posit	ion.	
Signature of New	Registered Agent, if changing		
Check if applicable			

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: <u>X</u> Change	PT	John Doe		
X Remove	\underline{V}	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Na</u>	<u>me</u>	<u>Addres</u> s
1) Change			·	
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5/ Change				
Add		_		
Remove				
6) Change				- · · · • •
Add				
Remove				
INCITIONE				

Mtach additional sheets, if necessary). (Be specific)	
		
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		·- — ·
If an amendment provides for an exchar	nge, reclassification, or cancellation of issued shares.	
	Iment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		

. . . .

04/09/2020 The date of each amendment(s) adoption: _ , if other than the date this document was signed. Effective date if applicable: tho more than 90 days after amendment tile date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) 🚍 The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. ☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes east for the amendment(s) was/were sufficient for approval (voting group) Dated 05/13/2020 Signature (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) HARO EHEBRECHI
(Typed or printed name of person signing) PRESIDENT

(Title of person signing)