## P19000065796

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JAN 1 4 2029 **S. YOUN**G

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ACE LIFESTY	LE INC					
DOCUMENT NUMB	ER: P19000065796						
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:					
1	LOVETTE DOBSON						
•		Name of Contact Perso	n				
	INCFILE.COM LLC						
-		Firm/ Company					
	17350 STATE HWY 249 STE 220						
•	Address						
I	HOUSTON, TX 77064						
_		City/ State and Zip Cod	e				
EFIL	E1234@INCFILE.CO	М					
	E-mail address: (to be us	sed for future annual report	notification)				
For further information	concerning this matter, pleas	se call:					
LOVETTE DOBS	ON	at (855	, 829-9090				
Name o	f Contact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:				
S35 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)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301				

## Articles of Amendment to Articles of Incorporation of

ACE LIFES	STYLE INC		
(Name of Corporation as current	ly filed with the Florida Dept. of State)		
P19000065796			
(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 amendment(s) to		
A. If amending name, enter the new name of the corporation:			
MS METAL SOLUTIONS INC	The new		
name must be distinguishable and contain the word "corporation"Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:	2719 HOLLYWOOD BLVD SUITE 5046		
(Principal office address MUST BE A STREET ADDRESS)	HOLLYWOOD, FL 33020		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2719 HOLLYWOOD BLVD SUITE 5046		
, <u>, , , , , , , , , , , , , , , , , , </u>	HOLLYWOOD, FL 33020		
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address			
Name of New Registered Agent			
2719 HOLLYWOOE	D BLVD SUITE 5046		
(Florida st	reet address)		
New Registered Office Address: HOLLYWOOD	, Florida 33020		
	(Cuy) (Zip Code)		
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar			
	29		
Signature of New I	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 Jon	<u>es</u>	
X Add	<u>sv</u>	Sally Smi	i <u>th</u>	
Type of Action (Check One)	Title	į	<u>Name</u>	<u>Addres</u> s
1) X Change	Р		DIOGO VASCONCELLOS	2719 HOLLYWOOD BLVD
Add				SUITE 5046
Remove				HOLLYWOOD, FL 33020
2) Change				
Add				
Remove				
3.) Change				
Add				
Remove				
4) Change		<del></del> -		
Add				<del></del>
Remove				
5) Change		<del></del> -		
Add				
Remove				
o) Change				
Add				
Remove				

(Attach addition	or adding additional Artic onal sheets, if necessary),	(Be specific)	<del></del>		
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. <u>If an amendr</u>	nent provides for an excha or implementing the amen	inge, reclassification	on, or cancellation	<u>n of issued shares</u> dmont itself:	<u>.</u>
(if not a	or unpiementing the amen pplicable, indicate N/A)	ument it not conta	med in the amen	ument usen.	
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The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date <u>if applicable</u> :  (no more than 90 days after amendment file date	٧)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the an by the shareholders was/were sufficient for approval.	nendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The followinust be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
■ The amendment(s) was/were adopted by the board of directors without shareholder action and action was not required.	shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and share action was not required.	eholder
NOVEMBER 21, 2019 Dated	
Signature OCOCONCOLOS  (By a director, president or other officer – if directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
DIOGO VASCONCELLOS	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	