## P190000780002

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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|   |

Office Use Only



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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO                              | RATION: EVOLVE RESOU                       | RCES INC   |  |  |  |
|--|--|--|--|--|--|
| DOCUMENT NUM                               | P19000078002                               |  |  |  |  |
| The enclosed Article                       | s of Amendment and fee are su              | bmitted for filing.  |  |  |  |
| Please return all corre                    | espondence concerning this ma              | tter to the following:   |  |  |  |
|  | ANITA T. PATE                              |  |  |  |  |
|  |  | Name of Contact Person   | 1  |  |  |
|  | EVOLVE RESOURCES INC                       | J.   |  |  |  |
|  |  | Firm/ Company  |  |  |  |
|  | 214 HALTON CIRCLE                          |  |  |  |  |
|  |  | Address  |  |  |  |
|  | SEFFNER, FL 33584                          |  |  |  |  |
|  | City/ State and Zip Code                   |  |  |  |  |
|  | ANITA@EVOLVERESOUI                         | RCES.COM   |  |  |  |
|  | -  | sed for future annual report   | notification)  |  |  |
|  |  |  |  |  |  |
| For further informati                      | on concerning this matter, plea            | se call:   |  |  |  |
| ANITA T. PATE                              |  | at (813  | 436-3700   |  |  |
| Namo                                       | of Contact Person                          | Area Co  | de & Daytime Telephone Number  |  |  |
| Enclosed is a check t                      | for the following amount made              | payable to the Florida Dep   | artment of State:  |  |  |
|  | ū  |  |  |  |  |
| ■ \$35 Filing Fee                          | ☐S43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |  |  |
|  | ailing Address                             |  | Address  |  |  |
| Amendment Section Division of Corporations |  | Amendment Section Division of Corporations                                 |  |  |  |
|  | Vision of Corporations  ) Roy 6327         |  | entre of Tallahassee   |  |  |

Tallahassec, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

| EVOLVE RESOURCES INC.  |                              |   |  |  |
|--|------------------------------|---|--|--|
| (Name o  | f Corporation as currenti    | y filed with the Florida Went Aft Sale) Aft 9: 2  |  |  |
| P19000078002   | 000078002 SECRETATE          |   |  |  |
|  | (Document Number o           | SECRETATY OF STATE  f Corporation (if known) TALLAHASSEE, FL  |  |  |
| Pursuant to the provisions of section 607, its Articles of Incorporation:  | 1006, Florida Statutes, this | Florida Profit Corporation adopts the following amendment(s) to   |  |  |
| A. If amending name, enter the new na  | ime of the corporation:      |   |  |  |
|  |                              | The new   |  |  |
| name must be distinguishable and contain "Inc" or Co.," or the designation "Co" chartered," "professional association,"  | lorp," "Inc," or "Co". 2     | company," or "incorporated" or the abbreviation "Corp.,"<br>A professional corporation name must contain the word |  |  |
| B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>  |                              |   |  |  |
| D. If amending the registered agent an new registered agent and/or the new registered agent agent and/or the new registered agent  | d/or registered office add   |   |  |  |
| Name of New Registered Agent   | ANITA T. PATE                |   |  |  |
|  | 214 HALTON CIRCLE            |   |  |  |
|  | (Florida str                 | rect address)   |  |  |
| New Registered Office Address:   | SEFFNER                      | . Florida 33584   |  |  |
| in the state of th |                              | (City) (Zip Code)   |  |  |
| New Registered Agent's Signature, if c I hereby accept the appointment as regist   | ered agent. I am familiar    |   |  |  |

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)

Example:

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 = Trustec; 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 <math>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                   | <u>v</u>     | Mike Jones  |                 |
| X Add                      | <u>sv</u>    | Sally Smith |                 |
| Type of Action (Check One) | <u>Title</u> | <u>Name</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                     |              |             |                 |

| (Add of the first      | ing additional Articles                   | , enter change(s)                     | here:             |                                       |             |
|------------------------|---|---------------------------------------|-------------------|---------------------------------------|-------------|
| (Attach additional she | eets, if necessary). (B                   | se specific)                          |                   |                                       |             |
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| F. If an amendment pr  | rovides for an exchanc                    | reclassificatio                       | n or cancellation | of issued shares.                     |             |
| provisions for imp     | lementing the amenda<br>de, indicate N/A) | nent if not conta                     | ined in the amend | ment itself:                          |             |
| (if not applicab       | le, indicate N/A)                         |                                       |                   |                                       |             |
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|                        |   |                                       |                   |                                       |             |

| The date of each amendment(s) adoption  | <u></u>  | , if other than the                      |
|---|--|--|
| date this document was signed.  |  |  |
| Effective date if applicable:   |  |  |
|   | (no more than 90 days after amendment file date  | )<br>-                                   |
| Note: If the date inserted in this block document's effective date on the Departmen | es not meet the applicable statutory filing requirement of State's records.                                | its, this date will not be listed as the |
| Adoption of Amendment(s)  | (CHECK ONE)  |  |
| The amendment(s) was/were adopted by action was not required.                       | the incorporators, or board of directors without shareh  | nolder action and shareholder            |
| ☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient      | the shareholders. The number of votes cast for the an for approval.  | nendment(s)                              |
|   | y the shareholders through voting groups. The followiting group entitled to vote separately on the amendme |  |
| "The number of votes cast for the   | amendment(s) was/were sufficient for approval  |  |
| by  |  |  |
|   | (voting group)   |  |
| Dated   | alay   |  |
| Signature   | The to lo  |  |
| (By a director,   | president or other officer - if directors or officers have   |  |
|   | incorporator – if in the hands of a receiver, trustee, or  | other court                              |
| appointed fiduc   | ciary by that fiduciary)   |  |
|   | Mitak  |  |
| <del></del>   | (Typed or printed name of person signing)  | ····                                     |
|   | President  |  |
|   | (Title of person signing)  | <del></del>                              |



May 20, 2021

MNITA T. PATE EVOLVE RESOURCES INC. 214 HALTON CIRCLE SEFFNER, FL 33584 US

SUBJECT: EVOLVE RESOURCES, INC.

Ref. Number: P19000078002

We have received your document for EVOLVE RESOURCES, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 121A00010803

Anita Pada, President EVARE ROSOURCOS (813)445-6615 0 (813) 399-0459 214 Hadton Circles Seff ner FL 33584 Res annerding registered agent from our Johnen atty to Anita De Press