P200000003216

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Evolution Elevator	* & Escalator Corp			
DOCUMENT NUM	P20000003216				
The enclosed Article.	s of Amendment and fee are su	abmitted for filing.			
Please return all corre	espondence concerning this ma	itter to the following:			
	Christopher James				
		Name of Contact Person	1		
	Evolution Elevator & Escalator Corp				
		Firm/ Company			
	6750 N Andrews Ave STE 20	00			
		Address			
	Fort Lauderdale, Fl. 33309				
		City/ State and Zip Code	2		
	service@evolutionelevator.co	om			
	u	sed for future annual report	notification)		
For further information	on concerning this matter, plea	954	678-6300		
Name	of Contact Person	at (Area Co-	de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations The Centre of Tallahassee			
	lahassee, FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Evolution Elevator & Esciator Corp	20 5910. to
(Name of Cor	rporation as currently filed with the Florida Dept. of State)
P20000003216	
	(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name o	of the corporation:
	The new
	ord "corporation," "company," or "incorporated" or the abbreviation "Corp.," " "Inc," or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if app	plicable:
(Principal office address MUST BE A STREE	
C. Enter new mailing address, if applicable	2:
(Mailing address MAY BE A POST OFFI	
	registered office address in Florida, enter the name of the
new registered agent and/or the new reg	istered office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changi	ing Registered Agent:
I hereby accept the appointment as registered a	agent. I am familiar with and accept the obligations of the position.
	Signature of New Registered Agent, if changing
	Sugaritative of the mediane on the many supplying
Check if applicable	(07 0120 (11) () F. (1
☐ The amendment(s) is/are being filed pursua	.nt 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.

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	b	Rosemarie James	6750 N Andrews Ave STE 200	
Add			Fort Lauderdale, FL 33309	
X Remove 2) Change	V	Carla James	6750 N Andrews Ave STE 200	
Add			Fort Lauderdale, FL 33309	
X Remove 3) Change	<u> P</u>	Christopher James	6750 N Andrews Ave STE 200	
X Add			Fort Lauderdale, FL 33309	
Remove 4) Change X Add	P	Louis James	6750 N Andrews Ave STE 200 Fort Lauderdale, FL 33309	
Add Remove				
5) Change Add				
Remove				
6) Change Add				
Remove				

f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (If not applicable, indicate NA)		lding additional Art sheets, if necessary).	(Be specific)			
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(if not applicable, indicate N/A)	novisions for in	provides for an exce	<u>nange, reciassinca</u> endment if not cor	tained in the ame	on or issued snar indment itself:	<u>es,</u>
	(if not applic	able, indicate N/A)			<u>,</u>	
				<u> </u>	<u></u>	·

The date of each amendment(s) add	02/01/2020	
late this document was signed.	prion	If Other than the
Effective date <u>if applicable</u> :		
	(no more than 90 de	ays after amendment file date)
Note: If the date inserted in this blo locument's effective date on the Dep		e statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop action was not required.	ted by the incorporators, or boar	rd of directors without shareholder action and shareholder
The amendment(s) was/were adop by the shareholders was/were suff		imber of votes cast for the amendment(s)
must be separately provided for ea		h voting groups. The following statement e separately on the amendment(s): ufficient for approval
		• •
<u> </u>	(voting group)	 ;
2/01/2020 Dated Signature (By a direselected, appointer	ector, president or other officer- by an incorporator – if in the had fiduciary by that fiduciary) Christopher James	- if directors or officers have not been ands of a receiver, trustee, or other court
	(Typed or printed nan	ne of person signing)
Þ	resident	

(Title of person signing)