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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: INDUSTRUS SOI	JUTIONS, INC			
DOCUMENT NUMI	P20000005800				
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.			
Please return all corre	spondence concerning this ma	atter to the following:			
		PETER E. JOSEPH			
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	1		
	13	NDUSTRUS SOLUTIONS	, INC		
		Firm/ Company			
288 DOVEFIELD					
Address					
		ORANGE PARK, FL	32073		
		City/ State and Zip Cod	e		
		,			
		BRICK7@BELLSOI			
	n-mail address: (to be u	sed for future annual report	notification)		
For further informatio	n concerning this matter, plea	se call:			
	PETER JOSEPH	904	294-7079)))
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:		Π į
(2) \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	ROV 15 BRIDGE	
<u>Mai</u>	ling Address	Street	Address		

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, Fl. 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

INDUSTRUS SOLUTIONS, INC

(Name of Corpo	oration as currently file	d with the Florid	a Dept. of State)		
	P20000005899				
(De	ocument Number of Cor	poration (if knowr	1)		
Pursuant to the provisions of section 607,1006, Flits Articles of Incorporation:	orida Statutes, this <i>Flori</i>	da Profit Corpora	tion adopts the follo	owing amend	ment(s) to
A. If amending name, enter the new name of the	he corporation:				
				The n	ew
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," " "chartered," "professional association," or the a	Inc," or "Co". A pro	iny," or "incorpoi fessional corpora	rated" or the abbrev tion name must co	iation "Corp ntain the wo	., " ord
B. Enter new principal office address, if applic (Principal office address <u>MUST BE A STREET</u>					-
	_				-
					-
C. Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE	E BOX)				_
				in the	207
				1V.	72 ×
	_			:>= 	VOV
 If amending the registered agent and/or reg new registered agent and/or the new registered. 		n Florida, enter t	he name of the	手記	5
	rea wiffee address.				至
Name of New Registered Agent					1 . 0:
			<u></u>		0
	(Florida street ad	dress)		tri.	±
New Registered Office Address:			, Florida		_
	(City)		6	Zip Code)	
New Registered Agent's Signature, if changing	Registered Agent:				
hereby accept the appointment as registered age	nt. I am familiar with a	nd accept the oblig	gations of the positi	on.	
	Signature of New Registe		ging		
		-			
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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	JURNEE K. WOODARD	288 DOVEFIELD CT
Add X Remove			ORANGE PARK, FL 32073
2) Change			
Add Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add	.		
Remove 6) Change Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
<u> </u>	····
	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
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-	
an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(y not apprecion; man ale 1971)	
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file o	late)
Note: If the date inserted in this bedocument's effective date on the D	block does not meet the applicable statutory filing requirer epartment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without sha	areholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes east for the ufficient for approval.	amendment(s)
	proved by the shareholders through voting groups. The followed voting group entitled to vote separately on the amena	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
DatedSignature	BER 30, 2021 Lirector, president or other officer – if directors or officers have	ave not been
selecte appoin	ed, by an incorporator – if in the hands of a receiver, trustee, ited fiduciary by that fiduciary)	or other court
	PETER E. JOSEPH	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	