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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Montierre Energy Solutions, Inc. DOCUMENT NUMBER: _ P20000012747 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: James W. Douglas Name of Contact Person Firm/ Company 880 Jupiter Park Drive Ste 15 Address Jupiter, FL 33458 City/ State and Zip Code Linda@daecpa.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: James W. Douglas Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee **\$35** Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Malling Address Street Address

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
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

Montierre Energy Solutions, Inc.		
(Name of Corporation as current	tly filed with the Florida Dept. of State)	
P20000012747		
(Document Number	of Corporation (if known)	· · · · · · · · · · · · · · · · · · ·
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the fo	ollowing amendment(s) t
A. If amending name, enter the new name of the corporation:		
N/A		The new
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.A.	A professional corporation name must	reviation "Corp.,"
B. Enter new principal office address, if applicable:	N/A	292 PAL:
(Principal office address MUST BE A STREET ADDRESS)		>2 A
		
		20 888
C. Enter new mulling address if applicables		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office as new registered agent and/or the new registered office address	N/A	
		
D. If amending the registered agent and/or registered office ad-	dress in Florida, enter the name of the	
new registered agent and/or the new registered office address		
Name of New Registered Agent N/A		
(Florida s	treet address)	
· ·		
New Registered Office Address:	, Florida,	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen	<u>it:</u>	*.*
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the pos	illion,
Signature of New	Registered Agent, if changing	
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	PT	John Doe	2020 0.255 1.A.L.1
X Remove	$\underline{\mathbf{v}}$	Mike Jones	D APR ECRET LL AHA
X Add	<u>\$V</u>	Sally Smith	R 20 HASS
Type of Action (Check One)	Title	Name	Address SS-
1) Change	VP	McCay B Green	5512 SE Oak Preserve Terr. N
Add			Hobe Sound, FL 33455
X Remove			
2) Change			
Add			
Remove 3) Change			
Remove			***************************************
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
N/A			
			
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F. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, nament if not contained in the amendment itself:	<u> </u>	۲Ľ
(if not applicable, indicate N/A)	numerical for contained in the amenantus reserv		(ن
N/A			
			
			
			

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	March 1, 2020			
The date of each amendment date this document was signed		, it (other tha	in th
	March 1, 2020			
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)			
	his block does not meet the applicable statutory filing requirements, this date we be Department of State's records.	ill not be	: listed	as th
Adoption of Amendment(s)	(CHECK ONE)			
■ The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shareholder action ar	nd shareh	older	
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.			
must be separately provide	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s): cast for the amendment(s) was/were sufficient for approval (voting group)	SECRETARY CO	2020 APR 20 P	
Dated	3/5/2020	FLORIO/	H 2: 53	
sc	y a director, president or other officer - if directors or officers have not been lected, by an incorporator - if in the hands of a receiver, trustee, or other court pointed fiduciary by that liduciary)	<u> </u>		
	James W Douglas			
	(Typed or printed name of person signing)			
	P			
	(Title of person signing)		,	