P200000 20145

(Re	questor's Name)	
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(Ad	idress)	
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COVER LETTER

TO: Amendment Se Division of Cor		,	, •			
NAME OF CORPO	DRATION: Xero Technologies	s Inc.				
	1BER: P20000020745					
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.				
Please return all corr	respondence concerning this ma	tter to the following:				
	Mark Crabtree					
		Name of Contact Persor	i			
		Firm/ Company				
	1457 Vendome Court					
		Address				
	Cape Coral, Florida 33904					
		City/ State and Zip Code	•			
	mark@xerotechnologies.com					
	E-mail address: (to be u	sed for future annual report	notification)			
For further informati	on concerning this matter, plea	se call:				
Nicole Zarobinski		at (917	396-8000			
Name	of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check t	or the following amount made	payable to the Florida Depa	ortment of State:			
☐ \$35 Fiting Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address			Address			
	nendment Section	Amendment Section				
	vision of Corporations D. Box 6327	Division of Corporations The Centre of Tallahassee				
	llahassee, FL 32314	2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the P20000020745	Florida Dept. of State)
P20000020745	· ·
(Document Number of Corporation (if	f known) *O
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit C</i> its Articles of Incorporation:	Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	Thenew
name must be distinguishable and contain the word "corporation," "company," or "i "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional c "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable:	reet
(Principal office address MUST DE A STREET ANDRESS)	ted Kingdom, HR5 3DJ
	
C. Enter new mailing address, if applicable:	Terrace, Suite 5
(Mailing address MAY BE A POST OFFICE BOX)	Terrace, Suite 5
Cape Coral, F	Florida 33909
D. If amending the registered agent and/or registered office address in Florida,	enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent Mark Crabtree	
(Florida street address)	
New Registered Office Address: 1457 Vendome Court Cape Coral	, Florida 33904
(City)	(Zip Code)
None Books and America Cinners and Control of the Decision Books and D	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I god familiar with and accept t	the obligations of the position.
	,
Signature of New Registered Agent,	if changing

Check if applicable

 \square 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.

Example: X Change	PT	<u>John Doc</u>	
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	VP	James J. Mezzenga	3605 SW 6th Avenue
Add			Cape Coral, FL 33914
X Remove			
2) Change		_	_
Add			
Remove 3) Change			
Add			
Remove			
4) Change	<u> </u>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach add	g or adding additional sheets, if	necessary).	(Be specific)	ge(s) mere.			
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		···	 		 		
							
If an amen	dment provides For implement	ifor an excha	nge, reclassific	cation, or cance	llation of issue	d shares,	
	applicable, indi		uniene n not ci	meanieu in ene	<u>amenument it</u>	<u>err.</u>	
						······································	
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			-				

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this d partment of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder act	ion and shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment fficient for approval.	.(s)
	roved by the shareholders through voting groups. The following staten each voting group entitled to vote separately on the amendment(s):	ient
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selected	rector resident problem of cer – if directors or officers have not been , by an incorporator if in the hands of a receiver, trustee, or other cou	 urt
appoint	ed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
•	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	