P20000020755

(Re	questor's Name)		
(Add	dress)		
(Add	dress)		
(City	y/State/Zip/Phone	#)	
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Nam	ne)	
(Do	cument Number)		
Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: TECNOLYTICS C	CORP			
	BER: P20000020755				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	MARIO R. ABED				
		Name of Contact Person	1		
	GLOBAL PS SOLUTIONS LLC				
		Firm/ Company			
	813 N MAIN ST STE 302				
		Address			
	MCALLEN, TX 78501				
		City/ State and Zip Code	***************************************		
	marioabed@hotmail.com				
	-	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se call:			
MARIO R. ABED		at (802-851		
Name of Contact Person			le & Daytime Telephone Number		
Enclosed is a check fo	r 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)		
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 chassee, FL 32314	Amendi Division The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee f. Monroe Street, Suite 810 ssee, FL 32303		

Articles of Amendment to Articles of Incorporation of

(Name o	of Corporation as current	ly filed with the Florida Dept. of State)	ترا
P20000020755			
	(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment	ent(s) to
A. If amending name, enter the new na	ame of the corporation:		
	Corp." "Inc." or "Co".	The new company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word."	
B. Enter new principal office address, (Principal office address MUST BE A S			
C. Enter now mailing address if appli	icable:		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		813 N MAIN ST SUITE 302	
		MCALLEN, TEXAS 78501	
 If amending the registered agent an new registered agent and/or the new 			
Name of New Registered Agent	MARIO R. ABED	-	
	(Florida si	reet address)	
New Registered Office Address:		, Florida	
	-	(City) (Zip Code)	
New Registered Agent's Signature, if cl I hereby accept the appointment as regista	hanging Registered Agent ered agent. I am familiar	with and accept the obligations of the position.	
	Signature of New I	Registered Agent, if changing	
Check if applicable			

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

TECNOLYTICS CORP

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 = 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>	<u>John De</u>	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	S	_	MARIO R. ABED	813 N MAIN ST. SUITE 302
X Add				MCALLEN, TX 78501
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

	ticles, enter change(s) here: (Be specific)
NONE	
. If an amendment provides for an exch provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(у посарунсате, такие (УВ)	
(l) not applicable, maicale (MA)	

The date of each amendment(s	adoption:		, if other than the
date this document was signed.			
Effective date if applicable:	7/27/2020		
	(no more t	than 90 days after amendment file date)	<u> </u>
Note: If the date inserted in thi document's effective date on the		applicable statutory filing requirements, this depends.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>))	
■ The amendment(s) was/were action was not required.	dopted by the incorporator	rs, or board of directors without shareholder acti	ion and shareholder
☐ The amendment(s) was/were by the shareholders was/were		s. The number of votes cast for the amendment	(s)
		ers through voting groups. The following statem led to vote separately on the amendment(s):	nent
		ras/were sufficient for approval	
by			
	(voting group)		
07/27/20 Dated	20	1 Dm.	
Signature		Tarrest Programme and Programm	 _
		er officer – if directors or officers have not been	
	ted, by an incorporator – if inted fiduciary by that fidu	f in the hands of a receiver, trustee, or other counciary)	п
	SERGIO ALEJANDRO) SALCEDO ORDAZ	
	(Typed or pr	rinted name of person signing)	<u></u>
	PRESIDENT		
	(Title of pers	son signing)	