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COVER LETTER

TO: Amendment Section Division of Corporations

TRIC NORTH AMERICA	, INC.	
abmitted for filing.		
atter to the following:		
Name of Contact Person	n	
Firm/ Company		
or		
Address		
City/ State and Zip Cod	e	
sed for future annual report	notification)	
se call:	. 658-0220	
	de & Daytime Telephone Number	
payable to the Florida Depa		
S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	Address	
Amendment Section		
Division of Corporations P.O. Box 6327 Division of Corporations The Centre of Tallahassee		
	antro of Tallohooses	
	Name of Contact Person Firm/ Company Address City/ State and Zip Cod Sed for future annual report se call: at (802 Area Co payable to the Florida Depayable to the Florida Depayable to the Florida Copy (Additional copy is enclosed) Street Amend	

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

TAVRIDA	ELECTRIC NORTH AMERICA	INC

TAVRIDA ELECTRIC NORTH AMER	RICA, INC.		
(Name	of Corporation as currentl	v filed with the Florida Dept. o	f State)
P20000022599			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this A	Florida Profit Corporation adop	is the following amendment(s) t
A. If amending name, enter the new n	ame of the corporation:		
-			
name must be distinguishable and contain "Inc.," or Co.," or the designation "("chartered," "professional association,"	Corp," "Inc," or "Co". A	ompany," or "incorporated" or to professional corporation name	The new the abbreviation "Corp.," e must contain the word
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>			
			2020
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	<u>icable:</u> OFFICE BOX)		(
			277
D. If amending the registered agent an new registered agent and/or the ne			of the
Name of New Registered Agent	Steven Sims		
Hame of their negistered Agent	2000 Tall Pines Drive, Suit	200	
	(Florida stre		
N. B	Largo	,	33771
New Registered Office Address:		, F). 'City'	orida 33771 (Zip Code)
	•	Cir,)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar w	ith and accept the obligations of	the position.
	Simulation (N)	and the second of the second o	
	Signature of New Re	gistered 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.

Example:

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
I) Change	PTD	Steven Sims	2000 Tall Pines Drive
XAdd			Suite 200
Remove			Largo, FL 33771
2) Change		<u> </u>	
Add			
Remove 3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
	
	•
an amendment provides for an exch	ange, reclassification, or cancellation of issued shares.
rovisions for implementing the ame	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
an amendment provides for an exch rovisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and in the amendment itself:
rovisions for implementing the ame	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
rovisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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rovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an itself:

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
The amendment(s) was/were a must be separately provided for	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	:
"The number of votes car	st for the amendment(s) was/were sufficient for approval	
by	,	
	(voting group)	
7/3/2020 Dated	<u>νΛ ()</u>	
Signature	My L	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
	Steven Sims	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	