PZO 000029193

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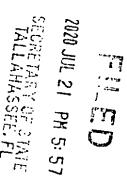
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COVER LETTER

Division of Corporations		
NAME OF CORPORATION: _	Zupreme Corp.	
DOCUMENT NUMBER:	P20000029193	

The enclosed Articles of Amendment and fee are submitted for filing.

TO: Amendment Section

Please return all correspondence concerning this matter to the following:

Juegen Hartwich Name of Contact Person
Name of Contact Person
Best Florida Conculting LLC 1110 SW 28th Street
Firm/ Company
1110 SW 28th Street
Address
Cape Coral, FL 33914
City/ State and Zip Code
inartwich@hotmail.com
E-mail/address: (to be used for future annual report notification)

For further information concerning this matter, please call:

	Hartwich Contact Person he following amount made		(573 - 96) de & Daytime Telephone Nartment of State:	ETAE)	2020 JUL 21	1 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
S35 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)	SSEE, FL	PM 5: 57	

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 Articles of Incorporation

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Zypreme Corp.

(Name of Corporation as currently filed with the Florida Dept. of State) P 2 00 000 2 9 1 9 3
(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006. Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
name must he distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". z "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	4531 Deleon St. Suite #211 Fort Myers, FL33907
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4531DeleanSt. Suite#211 Fort Myers FL 33907
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address Name of New Registered Agent 4531 Delon	St Suite # ZII
New Registered Office Address: Fort Mye	rect address) Y S, Florida 331907 (City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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.

Example: \underline{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>	Address
1) Change	<u>T</u>	Irene Zajac	3760 Piazza Dr.
Add Remove 2) Change Add	T	Marek Zajac	#202 Fort Myers FL 33916 5050 Soleado Way Apt. 420
Remove 3) Remove — Add			Fort Myers, FL 33966
Remove 4) Change Add			
Remove 5) Change Add			SECRE ALL AHASY
Remove 6) Change Add			# 5: 57 Fire
Remove			

f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)
	
	
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	hange, reclassification, or cancellation of issued shares. endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	endment it not contained in the amendment usen.
77	
	
	/-

, if other than the The date of each amendment(s) adoption: _____ date this document was signed. Effective date if applicable: (no more than 90) days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. □ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval 7/15/2020 Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)