P2 000086169

(R	equestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer: RNE 1 2022
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: J&A Tech INC
DOCUMENT NUMBER: <u>P20000 36169</u> 3/14
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Judes Diaujuste Name of Contact Person
Firm/ Company 4354 Fountainview (N Address
Orlando, Fl 32808 City/ State and Zip Code
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Judes Diaujusta at (407) 300 3189 Name of Contact Person Area Code & Daytime Telephone Number.
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

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	.H lech F	NC SECRETAR	Y 05 51
(Name of Corpo	ration as currently filed with the	Florida Dept. of State) IALLAHASS	EC. FLOI
<u> </u>	000036169		
(Do	ocument Number of Corporation (if	known)	
rsuant to the provisions of section 607,1006, Fk Articles of Incorporation:	orida Statutes, this <i>Florida Profit C</i>	Corporation adopts the following amendmen	nt(s) to
. If amending name, enter the new name of th	ne corporation:		
JAHO (OG	listics In.	The new	
ame must be distinguishable and contain the word Inc" or Co" or the designation "Corp," "I chartered," "professional association," or the a	lnc," or "Co". A professional c	ncorporated" or the abbreviation "Corp.,"	
Enter new principal office address, if applic Principal office address MUST BE A STREET			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)		
			
. If amending the registered agent and/or reg new registered agent and/or the new registe		enter the name of the	
Name of New Registered Agent		······································	
	(Florida street address)		
New Registered Office Address:	(Civ)	, Florida	

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)

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>	John Do	<u>e</u>		
X Remove	<u>V</u>	Mike Jos	nes		
X Add	<u>sv</u>	Sally Sm	nith		
Type of Action (Check One)	Title		<u>Name</u>		Address
1) Change		_		 	
Add					
Remove				-	
2) Change				 	
Add					
Remove 3) Change		_		 	
Add					
Remove					
4) Change		_			<u> </u>
Add					
Remove				-	
5) Change		_			
Add				,	
Remove				_	
6) Change					
Add					
Remove					

Attach additional sho	ng additional Art	(Re specific)	inge(s) here:			
тасн шатопа УП	els, y necessury).	(be specific)				
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f an amendment p <u>r</u>	ovides for an exc	hange, reclassi	fication, or car	icellation of iss	ued shares,	
provisions for impl	ementing the amo	endment if not	contained in t	he amendment	itself:	
(if not applicabl	le, indicate N/A)					
			•			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(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, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without sharehold action was not required.	er action and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amend by the shareholders was/were sufficient for approval.	iment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following a 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	
by''	
(voting group)	
Signature (By a director, president or other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustec, or oth appointed fiduciary by that fiduciary) (Typed or printed name of person signing)	