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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: HMN/HUMAN &	& MACHINE NETWORK	INC.		
DOCUMENT NUMBE	P20000051408				
The enclosed Articles of	Amendment and fee are su	bmitted for filing.			
Please return all correspo	ondence concerning this ma	atter to the following:			
		CARL A. DUMERVIL			
_		Name of Contact Person	1		
	HMN/HUMAN & MACHINE NETWORK INC.				
_	Firm/ Company				
1507 SW 18 DR					
_	Address				
		BOYNTON BEACH, FL	33426		
		City/ State and Zip Code	2		
	ma	thiaslaureus 1967@gmail.co	om		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, plea				
i or rardier intormation (concerning this matter, piea	se can:			
CARL A	. DUMERVIL	305	788-6887		
Name of	Contact Person		de & Daytime Telephone Number		
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment of State:		
\$35 Filing Fee		S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address ment Section in of Corporations entre of Tallahassee V. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

HMN/HUMAN & MACHINE NETWORK INC.

(Name of Cor	poration as currently filed with the Flor	ida Dept. of State)
	P20000051498	
(Document Number of Corporation (if know	wn)
Pursuant to the provisions of section 607.1006, lits Articles of Incorporation:	Florida Statutes, this <i>Florida Profit Corpo</i>	ration adopts the following amendment(s) to
A. If amending name, enter the new name of HUMAN & MACHINE NETWORK (H		The new
name must be distinguishable and contain the we "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the	"Inc," or "Co". A professional corpo-	porated" or the abbreviation "Corp."
B. Enter new principal office address, if apple (Principal office address MUST BE A STREE	licable: TADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	TE BOX)	
D. If amending the registered agent and/or renew registered agent and/or the new regis	egistered office address in Florida, enter tered office address: CARL A. DUMERVIL	the name of the
Name of New Registered Agent		·····
	1507 SW 18 DR	
	(Florida street address)	
New Registered Office Address:	BOYNTON BEACH	, Florida 33426
	(City)	(Zip Code)
New Registered Agent's Signature, if changin I hereby accept the appointment as registered ag	gent. I am familiar with and accept the ob	2020 SEJ
	Signature of New Registered Agent, if cha	inging 28
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	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	P/CEO	Jean Antoine Mathias Laureus	1507 SW 18 DR
Add			BOYNTON BEACH, FL 33426
Remove			
2) X Change	S/D	Carl A. Dumervil	1507 SW 18 DR
Add			BOYNTON BEACH, FL 33426
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	~ ~~	-	
Add			
Ramove			

E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
N/A	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
ty not approasse, mancare tory	

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The date of each amendment(s) addate this document was signed.	SEPTEMBER 9, 2020	, if other than the
SI Effective date if applicable:	EPTEMBER 9, 2020	
	(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 date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) efficient for approval.	
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement 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 di	rector, president or other officers flatrectors or officers have not been it, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary) CARL A. DUMERVIL (Typed or printed name of person signing) General Secretary / Director	-
•	(Title of person signing)	