P20000060492

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: WFO-U.S. CHEMI	ICAL, INC			
DOCUMENT NUMB	ER:	<u> </u>			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	AL KAMPA				
-		Name of Contact Person			
	KAMPA CONSULTING				
•		Firm/ Company			
	101 S. KRAEMER BLVD., #	124			
-	Address				
	PLACENTIA, CA 92870				
-		City/ State and Zip Code			
-	E-mail address: (to be us	sed for future annual report	notification)		
		-			
For further information	concerning this matter, pleas	se call:			
AL KAMPA		at (⁷¹⁴	724-2743		
Name of Contact Person		Area Coo	le & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Amends Division The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810 ssee, FL 32303		

Articles of Amendment to Articles of Incorporation of

WFO-U.S. CHMICAL, INC	" ′.
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P20000062492	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
WFO-U.S. CHEMICAL, INC	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
	
C. Enter new mailing address, if applicable:	N/A
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office ade	dress in Florida, enter the name of the
new registered agent and/or the new registered office address	
Name of New Registered Agent N/A	
(Florida s	treet address)
·	ireel adaress)
New Registered Office Address:	(City) , Florida (Zip Code)
	(inp code)
New Registered Agent's Signature, if changing Registered Agen	ıt:
I hereby 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: X Change	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo		
X Add	<u>SV</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	-	_		
Add				
Remove				
2) Change		<u> </u>		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

L. <u>If am</u>e (Attacl	ending or adding additional Article h additional sheets, if necessary). (es, enter change(s) here: (Be specific)
N/A	in additional sheets, y necessary).	ar specifics
N//X		
		
_		
. <u>If an a</u>	amendment provides for an exchan	nge, reclassification, or cancellation of issued shares,
prov (isions for implementing the amends (if not applicable, indicate N/A)	ment if not contained in the amendment itself:
N/A	,,	
		
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-		

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The date of each amendment		, if other than the
date this document was signed		
Effective date if applicable:	AUGUST 7, 2020	
	(no more than 90 days after amendment file da	nte)
	his block does not meet the applicable statutory filing requirem to Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shar	cholder action and shareholder
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the are sufficient for approval.	amendment(s)
	c approved by the shareholders through voting groups. The followed for each voting group entitled to vote separately on the amenda	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	."'	
 	(voting group)	
	EMBER 22, 2020	
Dated		
Signature		
Signature _	a director, president or other officer - if directors or officers have	ve not been
se	ected, by an incorporator - if in the hands of a receiver, trustee, of	or other court
ар	pointed fiduciary by that fiduciary)	
	AL KAMPA	
	(Typed or printed name of person signing)	
	INCORPORATOR	
	(Title of person signing)	