Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

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•		Division of Con	porations		
· :		Fax Number	: (850)617-6380		
. "	From:				
		Account Name	: BLUMBERG/EXCELSIOR C	ORPORATE SERVICES,	INC.
		Account Number	: 075350000353		a.
		Phone	: (800)221-2972		(P)
<i>(11)</i>		Fax Number	: (917)243-5843	2021	
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**Enter	the email	address for thi	s business entity to be er only one email addres	used for future	
an	nual repor	t mailings. Ente	er only one email addres	ss please.** 🐪 📊	
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COR AMND/RESTATE/CORRECT OR O/D RESIGN HOISTCO INC.

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

MAR 0 8 2021

Articles of Amendment to Articles of Incorporation of

HOISTCO INC.			
(Name of Corporat	tion as currently filed with th	e Florida Dept. of State)	
P21000000182			
(Dосш	ment Number of Corporation (i	f known)	
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	la Statutes, this <i>Florida Profit</i> (Corporation adopts the following an	endment(s) to
A. If amending name, enter the new name of the c	orporation:		
name must be distinguishable and contain the word "co" Inc.," or Co," or the designation "Com" "Inc.	Ornoration " "company " or "	The	new
"Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbre		ncorporatea or the abbreviation "C corporation name must contain the	iorp.," word Q
B. Enter new principal office address, if applicable	.		2
(Principal office address MUST BE A STREET ADI	DRESS)		<u> </u>
			1
C Enter non-mailing add and to 11 ha	 ,		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)X)	•	
	,		<u> </u>
	 		_
			-
D. If amending the registered agent and/or register new registered agent and/or the new registered (ed office address in Florida.	enter the name of the	
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		. Flo r ida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regis	stered Agent		
hereby accept the appointment as registered agent. I	am familiar with and accept th	ne obligations of the position.	
		• •	
Simul	ure of New Registered Agent, i	f ab anning	
	- c of them neglistered Agent, I	i changing	
Check if applicable The amendment(s) is/are being filed nursuons to a 66	07 m100 (11) (-) - P.O		
The amendment(s) is/are being filed pursuant to s. 60	11.0120 (11) (c), 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:

<u>A</u> Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
_X Add	<u>5Y</u>	Sally Smith	
Type of Action (Check One)	Title	Name .	Address
i)Change	PT	Denise Lymn	6934 My Ladys Way
X Add			Waxhaw NC 28173
Remove			
2) Change	<u>v</u>	John Lymn	6934 My Ladys Way
X Add			Waxhaw NC 28173
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ticles, enter change(s) here: (Be specific)
	,
an amendment provides for an exchan	nge, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	lment if not contained in the amendment itself:
Compensation and Control of the Cont	

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 stanutory 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 by	and date of each amendment(s) adoption: date this document was signed.	if other than the
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 by	Effective date if applicable:	
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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 by	The amendment(s) was/were adopted by to action was not required.	he incorporators, or board of directors without shareholder action and shareholder
"The number of votes cast for the amendment(s) was/were sufficient for approval by	☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for	ne shareholders. The number of votes cast for the amendment(s) or approval.
"The number of votes cast for the amendment(s) was/were sufficient for approval by	☐ The amendment(s) was/were approved by must be separately provided for each voting	the shareholders through voting groups. The following statement or group entitled to vote separately on the amendment(s):
O3/03/2021 Dated (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) Denise Lymn (Typed or printed name of person signing) President		
Dated Dated Dated		
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) Denise Lymn (Typed or printed name of person signing) President	(M	oting group)
(Typed or printed name of person signing) President	Signature (By a director, prescreted, by an inc	Orporator - If in the hands of a receiver trustee, or other point
President	Denise Ly	mn
		(Typed or printed name of person signing)
(Title of person signing)	President	
		(Title of person signing)