P21000018216

(Requestor's Name)	· 			
(Address)	,			
(Address)	<u> </u>			
(City/State/Zip/Phone	#)			
PICK-UP WAIT	MAIL			
(Business Entity Nam	ne)			
(Document Number)				
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: 4DMED, INC					
DOCUMENT NUMBER						
The enclosed Articles of	Amendment and fee are su	bmitted for filing.				
Please return all correspo	ndence concerning this ma	tter to the following:				
	M TINCHEKNY.	_				
Hd	tadTin Cheung					
		Name of Contact Person				
MI	METAVERSE AI, INC					
		Firm/ Company				
20	0-100 Royal Park					
	•	Address				
Va	ncouver, BC V7T1A2 Can	ada				
		City/ State and Zip Code				
bd	oneal59@gmail.com					
	= :	sed for future annual report	notification)			
For further information c	oncerning this matter, pleas	se call:				
Hau Tin Cheung		at (<u>604</u>	922-3900			
Name of (Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for th	ne following amount made	payable to the Florida Depa	artment of State:			
■ \$35 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)			
<u>Mailin</u>	g Address	Street	Address			
	lment Section	Amendment Section				
	on of Corporations		n of Corporations entre of Tallahassee			
	ox 6327 assee, FL 32314		N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



4DMED, INC.

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

2022 APR 29 AM 8: 16

(Name of Corporation	on as currently filed wi	th the Florida Dept. of St	
P21000018216		ا بسب بارسان 	<u>.</u>
(Docum	nent Number of Corpora	tion (if known)	
Pursuant to the provisions of section 607.1006, Floridats Articles of Incorporation:	a Statutes, this <i>Florida F</i>	Trofit Corporation adopts the	he following amendment(s)
A. If amending name, enter the new name of the co	orporation:		
METAVERSE AL, INC.			The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc.," "chartered," "professional association," or the abbre	" or "Co". A professi		abbreviation "Corp.,"
3. Enter new principal office address, if applicable			
Principal office address <u>MUST BE A STREET ADL</u>	DRESS)		
			
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>		
	4 		
 If amending the registered agent and/or register new registered agent and/or the new registered 		orida, enter the name of t	<u>ihe</u>
	onice address.		
Name of New Registered Agent			
	12 1		
	(Florida street addres	s)	
New Registered Office Address:	// ```	, Flori	
	(City)		(Zīp Code)
New Registered Agent's Signature, if changing Reg	gistered Agent;		
hereby accept the appointment as registered agent.		iccept the obligations of th	e position.
Sions	ature of New Registered	Agent if changing	
мули	anire of their registered	agent, y charging	

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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	\underline{V}	Mike Jor	nes	
X Add	<u>sv</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4)Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

utach <i>addinonal</i>	dding additional Art sheets, if necessary).	(Be specific)				
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an amendment	provides for an exc uplementing the am	hange, reclassific	<u>ation, or cancel</u>	<u>llation of issue</u>	d shares,	
orovisions for in	nplementing the ama able, indicate N/A)	endment il not co	ontained in the a	amenament its	<u>eit:</u>	
(у ног арумс	une, maicale wa)					
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		 -				<u> </u>

The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
Upon Filing Effective date <u>if applicable</u> :	
(no more than 9	0 days after amendment file date)
Note: If the date inserted in this block does not meet the applic document's effective date on the Department of State's records.	cable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or laction was not required.	board of directors without shareholder action and shareholder
■ The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval.	e number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders three must be separately provided for each voting group entitled to	
"The number of votes cast for the amendment(s) was/we	re sufficient for approval
by	
(voting group)	
Dated APRIL 08 22	
Signature	
	cer - if directors or officers have not been the hands of a receiver, trustee, or other court)
Hau Tin Cheung	
(Typed or printed	name of person signing)
President	
(Title of person si	gning)