## P21000061822

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☐ PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name)	
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: Phot	nonie MEMS, Inc	
DOCUMENT NUMB	ER:		
The enclosed Articles of	f Amendment and fee are su	ubmitted for filing.	
Please return all corresp	oondence concerning this ma	atter to the following:	
-	Willian	Name of Contact Person	
-	Phonor		
-	391	6 NW 21 Street	
-	Ga	Address ainesville, FL 32605 City/ State and Zip Code	
-	E-mail address: (to be u	The Phononic MEMS. Coased for future annual report notification)	MC
For further information	concerning this matter, plea-	2022 	ħ
Will.	iam Cart	a <sub>1</sub> (352) 554 53545 [	
	• • • • • • • • • • • • • • • • • • • •	e payable to the Florida Department of State:	)
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee  Certified Copy Certificate of Status (Additional copy is enclosed)  (Additional Copy is enclosed)	
Amer Divis	ing Address idment Section ion of Corporations Box 6327	Street Address Amendment Section Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Sept 26, 2022

Please make the corrections to our Florida Articles of Incorpration as indicated. Also we request a Certificate of Status.

Payment of \$35 +8.75 = \$43.75 is enclosed.

Thank you,

William N. Carr, CEO



January 9, 2023

WILLIAM CARR PHONONIC MEMS, INC 3916 NW 21 STREET GAINESVILLE, FL 32605

SUBJECT: PHONONICMEMS INC Ref. Number: P21000061822

We have received your document for PHONONICMEMS INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Non-Profit Corporation, but your entity is a Florida Profit Corporation. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 523A00000571

JAN 2 5 2023



February 3, 2023

WILLIAM CARR PHONONIC MEMS, INC 3916 NW 21 STREET GAINESVILLE, FL 32605

SUBJECT: PHONONICMEMS INC Ref. Number: P21000061822

We have received your document for PHONONICMEMS INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

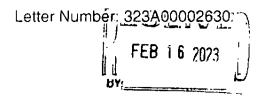
If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

The Check we have for this filing was deposited back in September so I do not think the attached check is needed for our office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator



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## Articles of Amendment to Articles of Incorporation

of	<b>✓</b>
Phononic 1	UEANS Inc
(Name of Corporation as currently filed with	the Florida Dept. of State)
P 100	00 61822
(Document Number of Corporation	on (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Pro</i> its Articles of Incorporation:	ofit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A profession "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  G	1916 IVW 21 Street
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	32605 916 NW ZI Street ainesville, FL 32605
D. If amending the registered agent and/or registered office address in Flor new registered agent and/or the new registered office address:	rida, enter the name of the
Name of New Registered Agent  3916  (Florida street address)	IW 21 Street 5
New Registered Office Address: Gainesur	He Florida 32605 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the appointment as registered agent.	cept 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>e</u>	
X Remove	Y	Mike Jos	nes	
_X Add	<u>sv</u>	Sally Sn	nth	
Type of Action (Check One)	<u>Title</u>		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				

<u>If amending or adding addition</u> Attach <i>additional sheets, if nece</i> .					
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If an amendment provides for	an exchange, rec	lassification, or :	cancellation of is	sued shares,	
provisions for implementing t	he amendment if	not contained in	the amendmen	t itself:	
(if not applicable, indicate	N/A)				
<u> </u>			<del></del>		
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			-,		

The date of each amendment(s) adoption: Oct 1, ZOZZ date this document was signed.	, if other than the
Effective date if applicable:  Oct 1, 2022  (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, this dat document's effective date on the Department of State's records.	te 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 shareholder action was not required.	on and shareholder
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.	<b>i</b> )
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):	rnt
"The number of votes east 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 been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Title of person signing)	