P21000080221

(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phone	? #)
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10/01/21--01010--021 **43.75



A. Butler

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Saferock INC		
	BER: P21000080221		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Valery Mondesir		
		Name of Contact Persor	1
	Saferock Inc		
		Firm/ Company	
	8106 NW 101ST AVE		
		Address	
	Tamarac FL 33321		
		City/ State and Zip Code	>
	Info@elpisexpress.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Valery Mondesir		at (954	6874760
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the 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)
Am Div P.O	endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation of

SAFEROCK INC

21000080221 ursuant to the provisions of section 607.100			ent. of State	PH 12: 37
			ZIUUI I	
	(Document Number of	Corporation (if known)		GE STATE
Articles of Incorporation:	6, Florida Statutes, this I	Florida Profit Corporation	adopts the fo	llowing amendment
. If amending name, enter the new name	of the corporation:			The new
ame must be distinguishable and contain the lnc.," or Co.," or the designation "Corp chartered," "professional association," or	" "Inc," or "Co". A			reviation "Corp.,"
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)		8106 NW 101ST AVE		
		Tamarac FL 33321		
. Enter new mailing address, if applicab (Mailing address MAY BE A POST OF)		SAME AS ABOVE		
. If amending the registered agent and/o new registered agent and/or the new re			name of the	
	06 NW 101ST AVE		<u>.</u>	
	(Florida str	et address)	<u> </u>	<u></u>
New Registered Office Address:	marac	•	, Florida ³³	3321
New Regimerea Office Address.		(City)	, rionga	(Lip Code)

☐ 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)

Example:

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>	<u>John Doe</u>			
X Remove	<u>v</u>	Mike Jones			
_X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	Name	<u>Addres</u> s		
1) Change	VP	GUEITIER, CAIRIGHT	100 NW 5TH AVE		
Add			Hallandale FL 33009		
X Remove					
2) Change	VP	Caingth Guerrier	100 NW 5TH AVE		
X Add			Hallandale FL 33009		
Remove 3) Change	<u>s</u>	Guerrier Johanne Francoise	100 NW 5TH AVE		
Add			Hallandale FL 33009		
X Remove					
4) Change	S	Johanne Francoise Guerrier	100 NW 5TH AVE		
X Add			HALLANDALE FL 33009		
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

	sheets, if necessary).	(Be specific)				
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	provides for an exc	hange, reclassific	cation, or cancell	ation of issued	shares.	
an amenament	iplementing the am	enament if not c	ontained in the a	menament itsei	<u>T;</u>	
<u>rovisions for in</u>	able_indicate N/4) =					
<u>rovisions for in</u>	able, indicate N/A)					
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<u>rovisions for in</u>	able, indicate N/A)					

•

	09/29/21	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
10	/05/21	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more man 20 days after amenament file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were as action was not required.	dopted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	ı
	pproved by the shareholders through voting groups. The following statemen or each voting group entitled to vote separately on the amendment(s):	nt .
"The number of votes car	st for the amendment(s) was/were sufficient for approval	
by	.**	
, <u></u>	(voting group)	
09/29/21		
Dated		
Signature	11-100 ·	
· •	director, president or other officer - if directors or officers have not been	
	ed, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
	Valery Mondesir	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	