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From:

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN ULTIMATE POWERWEAR LSB INC.

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COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corp				
NAME OF CORPO	RATION: ULTIMATE POW	ERWEAR LSB INC		
DOCUMENT NUM	BER:			
	s of Amendment and fee are sul	bmitted for filing.		
Please return all corn	espondence concerning this ma	tter to the following:		
	Stephen Korn			
•		Name of Contact Person	1	
	Kim Marks CPA PA			
		Firm/ Company		
	2136 NE 123rd St			
		Address	· · · · · · · · · · · · · · · · · · ·	
	North Miami, FL 33181			
		City/ State and Zip Code		
	a			
	Stephen@kimmarkscpa.com			
	E-mail address: (lo be us	sed for future annual report	noutication)	
For further informati	on concerning this matter, pleas	se call:		
Stephen Korn		at (305	895-5815	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check if	for the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	S43.75 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)	
· —	ailing Address		Address	
•	mendment Section		Iment Section	
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314			N. Monroe Street, Suite 810	
		Tallahassee, FL 32303		

(((H21000400937 3)))

Articles of Amendment to Articles of Incorporation of

ULTIMATE POWERWEAR LSB INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P21000087406

(Document Number of Corporation (if known)

lment(s) to

Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	a Statutes, this Florida Profit Cor	poration adopts the following amend
A. If amending name, enter the new name of the c	orporation:	
		The n
name must be distinguishable and contain the word "c" "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbre	" or "Co". A professional cor,	orporated" or the abbreviation "Corp poration name must contain the we
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered		ter the name of the
Name of New Registered Agent		
<u></u>	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Rej	gistered Agent:	
I hereby accept the appointment as registered agent.		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.

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***	***

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 Smlth is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smlth, 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	PERTTI HASANEN	2700 SW 27TH AVENUE STE 101
Add			Miami, FL 33133
X Remove			
2) Change	<u></u>		·
Add			
Remove 3) Change			
Add	•		
Remove			
4) Change		.	
Add			
Remove		•	
5) Change		<u> </u>	
Add			·
Remove			
δ) Change			
Add	,		
Remove			:

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(Attach addi	g or adding additional Ar tional sheets, if necessary).	. (Be specific)	<u> </u>		-
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lf an amen	dment provides for an ex	change, reclassifie	tion, or cancellati	ion of issued shares	5
provisions (if not	s for implementing the an applicable, indicate N/A)	nendment (f not co	ntained in the amo	enament itseil:	
A					
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The date of each amendment(s) a date this document was signed.	doption:	if other the	an the	
Effective date if applicable:	(no more than 90 days after amendment file date)			
Note: If the date inserted in this be document's effective date on the De	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	not be listed a	as the	
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action and	shareholder		
The amendment(s) was/were add by the shareholders was/were se	opted by the shareholders. The number of votes east for the amendment(s) ifficient for approval.		,	•
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):			
	for the amendment(s) was/were sufficient for approval	SEC TALL	2021	
by	(voting group)	KETAI AHAS	2021 OCT 2	T
10/28/2021 Dated	 	SEE. F		T
Signature <i>G</i>	ORGECLANTON	STAT LORI	AM :::	
(By a d	lirector, 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 court ted fiduciary by that fiduciary)		52	
	GEORGE CLINTON			
	(Typed or printed name of person signing)			
	VP			
	(Title of person signing)			