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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: AM Structures, Inc	;				
DOCUMENT NUM	1BER:					
The enclosed Article	es of Amendment and fee are su	bmitted for filing.				
Please return all corr	respondence concerning this ma	tter to the following:				
	Andrew McCann					
		Name of Contact Person				
	AM Structures, Inc					
		Firm/ Company				
	1153 Town Center Dr #201					
	Address					
	Jupiter, FL 33458					
	City/ State and Zip Code					
	Quotes@am-structures.com					
		and fan fan an an	- Mifference Company			
	n-man address, (to be us	sed for future annual report	nouncation)			
For further informati	on concerning this matter, pleas	se call:				
Andrew McCann		561	951-0099			
Namo	e of Contact Person	Area Coo	) 951-0099 de & Daytime Telephone Number	_ ; ;		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	TALLAH?		
□ \$35 Filing Fee	■\$43.75 Filing Fee &	□\$43.75 Filing Fee &	□\$52.50 Filing Fee			
	Certificate of Status	Certified Copy	Certificate of Status	77 77 111		
		(Additional copy is enclosed)	Certified Copy (Additional Copy	iη (		
		enclosed)	is enclosed)	. 5		
M	ailing Address	Street	Address			
Amondment Section		Amendment Section				

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2023 HAY 22 Pit 2: 04

## Articles of Amendment to Articles of Incorporation of

AM Structures, Inc

AW Structures, inc				
(Name o	of Corporation as currently	filed with the Florida D	ept. of State)	
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	.1006, Florida Statutes, this F	lorida Profit Corporation	ร adopts the following	g amendment(s)
A. If amending name, enter the new n	ame of the cornoration:			
N/A	ame or the corporation.			
name must be distinguishable and contain	the word "composition " "co	minanti " ou "in opposite	ad" on the abbumistic	_The new
"Inc.," or Co.," or the designation "Contartered," "professional association,"	Corp," "Inc," or "Co". A			
D. Catanana and advantage of Catanada da and	if a an Earth las	N/A		
B. Enter new principal office address, (Principal office address MUST BE A S				
	,			
C. Enter new mailing address, if appl		N/A		
(Mailing address MAY BE A POST	OFFICE BOX)	-		
			<del> </del>	
				SEGRET SEGRET
				<b>国务</b>
<ul> <li>If amending the registered agent ar new registered agent and/or the new</li> </ul>		ess in Florida, enter the	name of the	1/2
new registered agent and/or the nev				
Name of New Registered Agent	N/A 	· · · · · · · · · · · · · · · · · · ·		
				Fig. 7.
	(Florida stre	et address)		구절 달
New Registered Office Address:	N/A		. Florida	ιτί
New Registered Office Address.	(1)	City)	, riorida (Zip C	inde)
New Registered Agent's Signature, if c	hanging Registered Agent:			
I hereby accept the appointment as regist	tered agent. I am familiar w	ith and accept the obligat	ions of the position.	
	Signature of New Re-	gistered Agent, if changin		
	Signature ty 110 h 110	Same of the same o	75	
Check if applicable		\ D.O.		
☐ The amendment(s) is/are being filed p	oursuant to s. 607.0120 (11) (	n, r.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)

Remove

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>oc</u>		
X Remove	<u>V</u>	Mike Jo	<u>ones</u>		
X Add	<u>sv</u>	Sally Si	mith		
Type of Action (Check One)	Title		<u>Name</u>	Address	
1) Change		<del></del>			
Add					
Remove					
2) Change		_			
Add					
Remove 3) Remove		_		<u> </u>	2023 HAY 22
Add				LE	AY 2
Remove				, ·	2 PH
4) Change		_		73 To 1	√.
Add				TATE	40 :Z
Remove					
5) Change		_			
Add					
Remove					
6) Change		_		<del></del>	
Add				<del></del>	

E. If amending or adding additional Articles, enter change(s) here:

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	/16/2023	
Effective date if applicable:	·	
	(no more than 90 days after amendment 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 action was not required.	dopted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were	lopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	at
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
Incorporator		
by	(voting group)	
	(voting group)	
select	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 court need fiduciary by that fiduciary)	
	Andrew McCann	
	(Typed or printed name of person signing)	2022 SEC
	President/Owner	ALLA AVH &
	(Title of person signing)	22 PH 2: 04 RR. OF STATE HANSSEE, FL