## P22000005120

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: AB HIGH TECH	INC			
	BER: P22000005120				
The enclosed Article	s of Amendment and fee are su	ibmitted for filing.			
Please return all corr	espondence concerning this ma	itter to the following:			
	OSLYN A BARAHONA				
		Name of Contact Person	n		
	AB HIGH TECH INC				
	Firm/ Company				
	49 PLANTATION BLVD				
	Address				
	LAKE WORTH, FLORIDA 33467				
		City/ State and Zip Cod	e		
	AMILCAPEREZ0094500@	GMAIL.COM			
	E-mail address: (to be us	sed for future annual report	notification)		
		_			
For further information	on concerning this matter, pleas	se call:			
OSLYN A BARAHONA		at (	543-3266		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
linclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	☐\$43.75 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

## Articles of Amendment to Articles of Incorporation of

AB HIGH TECH INC	
	ently filed with the Florida Dept. of State)
P22000005120	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	<u>i</u>
N/A	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co", "chartered," "professional association," or the abbreviation "P.,	" 'company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office ac	ddress in Florida, enter the name of the
new registered agent and/or the new registered office addr	'ess:
Name of New Registered Agent	
<del></del>	
(Florida	i street address)
New Registered Office Address:	Florida
	(Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	ent: ar with and accept the obligations of the position.
Signature of New	w Registered Agent, if changing

Check if applicable

Li 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.

<u>A</u> Change	<u>P1</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP	WENDY Y MOLINA MARTINEZ	49 PLANTANTION BLVD
X Add			LAKE WORTH, FL 33467
Remove			<del> </del>
2) Change			<del></del>
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			*****
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			<del></del>
remove			

	if necessary). (Be specific)			
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If an amendment provid-	es for an exchange, reclassification	n, or cancellation of is:	sued shares,	
provisions for implemen	ating the amendment if not contai	ned in the amendment	t itself:	
(if not applicable, in	dicate N/A)			
A				
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SEPTEMBER 02, 2025	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
09/02/2025 Effective date if applicable:	
(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 date will document's effective date on the Department of State's records.	I not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	. 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.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
INCORPORATORS	
(voting group)	
09/02/2025 Dated	
Signature X / Start Y	
(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)	
OSLYN A. BARAHONA	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)