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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: WICKFORD TECH	INOLOGIES, INC.			
DOCUMENT NUMBE	CR: P22000007545				
	Amendment and fee are sub	omitted for filing.			
Please return all corresp	ondence concerning this mat	ter to the following:			
		Corporate Maintenance Le	ad		
_		Name of Contact Person			
		Processing Department			
		Firm/ Company			
		1450 Vassar St.			
_	Address				
	Reno, NV 89502				
	***	City/ State and Zip Code			
	concerning this matter, pleas				
Processing Department Name of Contact Person		at (1 8 Dessine Talankan Number		
	Contact Person the following amount made				
S35 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)		
Amei Divis P.O.	ing Address indiment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, F1, 32303		

Articles of Amendment

Articles of Incorporation oſ

FILED

2022 MAR 14 PH 12: 06

	01	14 Lu 15: 06
	WICKFORD TECHNOLOGIES, INC.	SECRET GARAGE
(Name of Co	rporation as currently filed with the Florida	Dept. of Schree LAHASSEF FI
	P22000007545	
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	, Florida Statutes, this <i>Florida Profit Corporatio</i>	on adopts the following amendment(s) to
A. If amending name, enter the new name of	of the corporation:	
		The new
name must be distinguishable and contain the v "Inc.," or Co.," or the designation "Corp, "chartered," "professional association," or t	word "corporation," "company," or "incorpora " "Inc." or "Co". A professional corporation he abbreviation "P.A."	ted" or the abbreviation "Corp.," on name must contain the word
B. Enter new principal office address, if ap	plicable:	
(Principal office address MUST BE A STRE		
C. Enter new mailing address, if applicabl (Mailing address MAY BE A POST OFF	e:	
(Stuting duaress MAT BE A POST OFF	TCL BOX	
	registered office address in Florida, enter the	e name of the
new registered agent and/or the new re-	gistered office address:	
Name of New Registered Agent		
-		
	(Florida street address)	
	,	
New Registered Office Address:	(City)	, Florida
	Cuy	The Civiley
N N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	nin - During and America	
New Registered Agent's Signature, if change I have by account the approintment as registered	ging Registered Agent: Lagent Lam familiar with and accept the oblig	ations of the position.
i nevery accept the appointment as registered	agens. I am jamina maa and occept me being	

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action	<u>Title</u>	<u>Name</u>	Address
(Check One)	DIR	Evelyn lannotti	409 Wildlife Glen
Add			Bradenton
Remove			FL, 34209
2) Change	DIR	Daniel Iannotti	409 Wildlife Glen
x Add	·······		Bradenton
Add Remove 3) Change	DIR	Evelyn Lannotti	FL. 34209
Add Remove 4) Change Add	DIR	Daniel Lannotti	
Remove Change Add			
Remove 6) Change Add			
Remove			

	ets, if necessary).	(Be specific)			
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	ovides for an exch	iange, reclassific	ation, or cancellat	ion of issued share	<u>s,</u>
in amendment pro	amonting the amo	ndment if not co	ntained in the am	endment itself:	
in amendment pro	cincinng the ame				
an amendment provisions for imple	e, indicate N/A)				
an amendment provisions for imple (if not applicable	e, indicate N/A)				
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The date of each amendmen		, if other than the
date this document was signed		
Effective date if applicable:	n/a	
Enective date in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this d he Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder act	ion and shareholder
	re adopted by the shareholders. The number of votes east for the amendment ere sufficient for approval.	(s)
☐ The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following statened for each voting group entitled to vote separately on the amendment(s):	ieni
"The number of vote	s east for the amendment(s) was/were sufficient for approval	
by n/a		
	(voting group)	
3/7/2	022	
Dated		
Signature_	Guelyn M. Jamott By a director, president or other officer - if directors or officers have not been	
(1	By a director, president or other officer if directors or officers have not been	1
S S	elected, by an incorporator – if in the hands of a receiver, trustee, or other co	urt
ä	ppointed fiduciary by that fiduciary)	
	Evelyn M. Jannotti	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	

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