P22000008540

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: FUTURE SOLAR	USA, CORP				
DOCUMENT NUMBE			1-1-1-1			
	f Amendment and fee are su	bmitted for filing.				
Please return all corresp	ondence concerning this ma	tter to the following:				
F	ERNANDO SILVA					
_		Name of Contact F	Person			
S	SKYTRUST ENTERPRISE, LLC					
_		Firm/ Compan	y			
1	23 NW 13TH ST #214-12					
		Address				
I:	BOCA RATON, FL 33432					
_		City/ State and Zip	Code			
F	ERNANDO@SKYTRUST	ENTERPRISE.COM				
_	E-mail address: (to be us	sed for future annual r	eport notification)			
For further information FERNANDO SILVA	concerning this matter, pleas		463-2557			
	Contact Person	at () 463-2557 ra Code & Daytime Telephone Number			
	the following amount made					
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fed Certified Copy (Additional copy in enclosed)	Certificate of Status			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation οľ

FUTURE SOLAR USA, CORP

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

P22000008540			23.50 13.90 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1
(Docur	ment Number of Corporation (if I	enown)	-5
Pursuant to the provisions of section 607,1006, Floridits Articles of Incorporation:	a Statutes, this <i>Florida Profit Co</i>	orporation adopts the fol	lowing limindi
A. If amending name, enter the new name of the c	orporation:		
			The n
name must be distinguishable and contain the word "e "Inc.," or Co.," or the designation "Corp," "Inc. "chartered," "professional association," or the abbre	" or "Co". A professional co	corporated" or the abbre proporation name must c	viation "Corp
B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET ADI</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BC	<u> </u>		
D. If amending the registered agent and/or registe new registered agent and/or the new registered		nter the name of the	
			
Name of New Registered Agent			
	(Florida street address)		
	77 In the source in the con-	151 - 11	
New Registered Office Address:	tCity)	, Florida	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		re obligations of the posi	tion.
	•		
	Average Library	the second of	
Ngn	iature of New Registered Agent, i	j enanging	

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 Doc. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change PTJohn Doe X Remove $\underline{\mathbf{V}}$ Mike Jones X Add <u>SV</u> Sally Smith Type of Action Title Address <u>Name</u> (Check One) VP IGOR MATHEUS MEDIDA 3303 PORT ROYALE DR APT 40: 1) ____ Change FT LAUDERDALE, FL 33308 ____ Add \mathbf{X} Remove 2) ____ Change Add __ Remove 3) ____ Change ____ Add ____ Remove 4) Change ____ Add ____ Remove 5) ____ Change ____ Add Remove 6) ____ Change ____ Add Remove

	if necessarry	(Be specific)	ange(s) here:			
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	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendme	ent file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors wit	hout shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	lopted by the shareholders. The number of votes cas sufficient for approval.	t for the amendment(s)
	oproved by the shareholders through voting groups, or each voting group entitled to vote separately on the	
"The number of votes ca	at for the amendment(s) was/were sufficient for appro	oval
by		<u></u>
	(voting group)	
03/18/22 Dated		
		
Signature(By a	Jancoa M. Wozniak director, president or other officer - if directors or of	ficers have not been
selec	ed, by an incorporator – if in the hands of a receiver.	trustee, or other court
арроі	nted fiduciary by that fiduciary)	
	MARCOS M. WOZNIAK	
	(Typed or printed name of person signing)g)
	VP	
	(Title of person signing)	