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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations
NAME OF CORPORATION: EPOXY WORLD DOCUMENT NUMBER: P22000 5018
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person Copy World Drc. Firm/ Company 5595 Jonquil Cir # 303 Address Address City/ State and Zip Code Copy State and Zip Code E-man address: (to be used for future annual report notification) Grant Address Copy World Drc. Firm/ Company Address Address Address Address Gity/ State and Zip Code DSCAR Cubanos 9 (2) 9 Mail. Copy
For further information concerning this matter, please call:
OSCAN ALVAVEZ at (239) 595-0644 Name of Contact Person at (239) Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Street Address Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Amendment FILED to Articles of Incorporation 2022 OCT 31 PM 12: 54 ame of Corporation as currently filed with the Florida Dept. of State TA (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contdin the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida strect address) New Registered Office Address: . Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the 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.

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.

Example:

X Change	<u>PT</u>	John De	<u>se</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_	·	
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		<u>.</u>		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				··

	icles, enter change(s) here: (Be specific)
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f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

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The date of each amendment(s) adoption date this document was signed. Effective date if applicable:		D e than 90 day.	DO DO Sujier amendi	Dent file date)	·	if other	r than the
Note: If the date inserted in this bloc document's effective date on the Depar			statutory filing	g requirements, t	this date will no	ot be list	ted as the
Adoption of Amendment(s)	(CHECK ON	<u>(E</u>)					
The amendment(s) was/were adopte action was not required.	ed by the incorpora	itors, or board	of directors w	ithout sharehold	er action and sh	areholde	er
☐ The amendment(s) was/were adopte by the shareholders was/were suffice		lers. The num	ber of votes ea	ast for the amenc	lment(s)		
☐ The amendment(s) was/were approximust be separately provided for each "The number of votes east for by	ch voting group en	titled to vote s) was/were suf	eparately on t	he amendment(s		2022 OCT 31 F	
selected. h	tor, president or of by an incorporator of fiduciary by that file (Typed or	if in the handiduciary)		r, trustee, or othe		PM 12: 54	A TANK