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COVER LETTER

TO: Amendment Section Division of Corpo			
NAME OF CORPOR	ATION: Caliper Freight Co	rp	
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Stephanie Padly-Julien		
		Name of Contact Person	n
	Padiy Law PA		
		Firm/ Company	_
	1415 Panther Lane Suite 394		
		Address	
	Naples, Fl 34109		
•		City/ State and Zip Cod	્
	spadly@239lawyer.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Stephanie Padly-Julier	1	at (963-6043
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐S43.75 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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 thassec, FL 32314	Amend Divisio The Co 2415 Y	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

Caliper Freight Corp		<u>ــَــحـــ</u>
(Name of Corporation as current	v filed with the Florida Dept. of State)	N22 APR
P22000027459		PPF
(Document Number of	f Corporation (if known)	M22 APR 29
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the follow	
A. If amending name, enter the new name of the corporation:		_
		The net
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.A.	A professional corporation name must con	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
Trincipal office address <u>MOST BE A STREET ADDRESS</u>		
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 add	ress in Florida, enter the name of the	
new registered agent and/or the new registered office address		
Name of New Registered Agent		
(Florida st	eet address)	
New Registered Office Address:	, Florida	
		ip Code)
New Registered Agent's Signature, if changing Registered Agent	:	
hereby accept the appointment as registered agent. I am familiar		n.
Signature of New F	egistered Agent, if changing	
Check if applicable		
\Box 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.

X Change	PT	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>SV</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) X Change	Р		Denis Iwaniura	72 Commando Ct,
Add				Waterdown, ON, L8B0J6
Remove				
2) Change		_		
Add				
Remove Change		_	- <u></u>	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				_
Remove				

If amending or adding additional Arti- Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
. 210	

:uSign Envelope ID: CE1E55A8-BFE4-4F3A-BD55-4D7D0DDC90D5

The date of cach amending in (3) a	ndoption:	if other than the
date this document was signed.	•	
Effective date if applicable:		
	(no more than 90 days after amendment file do	rte)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirem repartment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shar	eholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the aufficient for approval.	amendment(s)
	proved by the shareholders through voting groups. The follo	
•	r each voting group entitled to vote separately on the amenda	•
must be separately provided for		•
must be separately provided for "The number of votes case	r each voting group entitled to vote separately on the amendate to the amendment(s) was/were sufficient for approval	•
must be separately provided for "The number of votes case	r each voting group entitled to vote separately on the amenda	vent(s):
must be separately provided for "The number of votes case	r each voting group entitled to vote separately on the amendate to the amendment(s) was/were sufficient for approval	2022 APR
must be separately provided for "The number of votes case by	r each voting group entitled to vote separately on the amendate to the amendment(s) was/were sufficient for approval	nent(s):

(Typed or printed name of person signing)

(Title of person signing)

Jan Iwaniura

Incorporator