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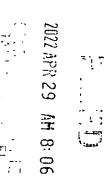
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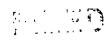
TO: Amendment Section

Division of Corporations NAME OF CORPORATION: SONIC WELDING INC DOCUMENT NUMBER: P22000030019 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ALLAN ORELLANA Name of Contact Person SONIC WELDING INC Firm/ Company 10334 SMYRNA DR Address ORLANDO FL 32817 City/ State and Zip Code jcanal@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407) 242-6283

Area Code & Daytime Telephone Number ALLAN ORELLANA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee S35 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Street Address Mailing Address** Amendment Section Amendment Section **Division of Corporations** Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



SONIC WELDING INC			2022 400 20	лм 8: 06
(Name o	f Corporation as currentl	y filed with the Florida Der		
P22000030019			· ·	- 2 3 A Z
	(Document Number o	f Corporation (if known)		The state of the s
Pursuant to the provisions of section 607. Its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation a	dopts the following	ng amendment(s) to
A. If amending name, enter the new na	ime of the corporation:			
				Thenew
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	"orp," "Inc," or "Co". 2	1 professional corporation i	or the abbreviati name must conta	ion "Corp" in the word
R. Knter new principal office address i	if annlicable:	1334 SMYRNA DR		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		ORLANDO FL 328017	н	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1334 SMYRNA DR		
		ORLANDO FL 32817		<u> </u>
			 	
D. If amending the registered agent an new registered agent and/or the new			me of the	
Name of New Registered Agent CANAL ACCOUNTIN		SERVICES INC		
	10556 WYNDCLIFF DR			
				_
	(Florida str	reet address)		
New Registered Office Address:	(Florida str	veet address)	, Florida 32817	

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 (Check One)	Title	Name	Address
1) Change	P	ALLAN ORELLANA	10334 SMYRNA DR
Add			ORLANDO FL 32817
X Remove 2) Change	P	IRRAEL ORELLANA HERNANDE Z	10334 SMYRNA DR
X Add			ORLANDO FL 32817
Remove 3) Change			
Add			
Remove			
4) Change			
Add Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

Tricket II C	ding or adding addition additional sheets, if neces	ssary). (Be specific)			
	authonar sneem, y neces	isary). (De specific)			
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<u>If an an</u>	endment provides for	an exchange, reclassif	ication, or cancella	tion of issued shares,	
provisi	ons for implementing the not applicable, indicate in	<u>ne amenament it not i</u> M/4)	contained in the an	ienament itseli:	
	ни ирупсиме, такие	(VA)			
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The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> : \mathcal{O}	20/2022	
Effective date in applicable. 9 47	30/2022 (no more than 90 days after amendment file d	late)
Note: If the date inserted in this be document's effective date on the Do	lock does not meet the applicable statutory filing requirement of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the ifficient for approval.	amendment(s)
	proved by the shareholders through voting groups. The followed each voting group entitled to vote separately on the amend	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by N/A	() () () () () () () () () ()	
by	(voting group)	
04/25/2022 Dated		
Signature Signature	Tracks. Man	
- By a d	rector, president or other officer - if directors or officers ha	
	 d, by an incorporator – if in the hands of a receiver, trustee, and fiduciary by that fiduciary) 	or other court
арропс		
	IRRAEL ORELLANA HERNANDEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	