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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	Artemisa Fence & ! RATION:	Metal Works Corp	
DOCUMENT NUMI	P22000042571 BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Eduardo I. Valdes		
		Name of Contact Person	1
	8350 NW 52nd Ter Suite 301	Firm/ Company	
	Doral, FL 33166	Address	
		City/ State and Zip Cod	<u> </u>
	bills@artemisfencing.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Eduardo I. Valdes		786 at (626-8732
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Dep	artment of State:
■ \$35 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)
Am Div P.O	ling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Artemisa Fence & Metal Works Corp	
(Name of Corporation as current P22000042571	tly filed with the Florida Dept. of State)
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
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 contain the word
B. Enter new principal office address, if applicable:	8350 NW 52nd Ter Suite 301
(Principal office address MUST BE A STREET ADDRESS)	Doral, FL 33166
	0250 NRV 52 NT 0 1 201
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8350 NW 52nd Ter Suite 301
	Doral, FL 33166
D. If amending the registered agent and/or registered office ad-	dress in Florida, enter the name of the
new registered agent and/or the new registered office addres	
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	ıt:
I hereby accept the appointment as registered agent. I am familiar	
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	n Doe	
X Remove	<u>V</u> <u>Mik</u>	se Jones	
X Add	<u>SV</u> Sall	y Smith	
Type of Action	Title	Name	<u>Addres</u> s
(Check One) 1) Change	PTSD	Carlos Herrera	13800 HIGHLAND DR. APT. 704
Add			NORTH MIAMI BEACH, FL 33181
Remove 2) Change X	PTSD	Eduardo I. Valdes	8350 NW 52nd Ter Suite#301
X Add			Doral, FL 33166
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			-
Remove			
6) Change			
Add			
Remove			

ach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
	
n amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
ovisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(i) not approaute, marcine 1011)	
	

08/08/2022

The date of each amendment(s) adopti	on:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department.	does not meet the applicable statutory filing requirements, this danent of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without shareholder action	on and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(ent for approval.	s)
	d by the shareholders through voting groups. The following statemed voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the	ne amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	00/08 EV	
Signature		
	or, president or other officer – if directors or officers have not been	
<u>-</u>	an incorporator – if in the hands of a receiver, trustee, or other counductary by that fiduciary)	τ
<u>_±</u>	(Typed or printed name of person signing)	
`	President, Treasurer, Secreta (Title of person signing)	ry, Drector