P2200046177

(Re	questor's Name)			
(Ád	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
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of 1/20/2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	•	CHNOLGIES INC				
DOCUMENT NUME	BER: P22000046177					
The enclosed Articles	of Amendment and fee are sul	omitted for filing.				
Please return all corres	spondence concerning this mat	ter to the following:				
	MARK CROSS EA					
		Name of Contact Person				
	MARK CROSS TAX SERVICES INC					
	Firm/ Company					
	209 S CLYDE AVE					
	Address					
KISSIMMEE FL 34741						
City/ State and Zip Code						
	MARKCROSSEA@PRODIGY.NET					
	E-mail address: (to be used for future annual report notification)					
For further information	n concerning this matter, pleas	e call:				
MARK CROSS		at (_) 908-2749			
Name o	of Contact Person	Area Coo	le & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	irtment of State:			
□ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303			

Articles of Amendment to Articles of Incorporation

of Incorporation

EQUANIMITY TECHNOLOIES INC	20	72 !!!! 20	
(Name of Corporation as currently filed with the Flo	orida Dept. of State)	22 JUL 20	TATE 8: 2
P22000046177		<i>:</i> .	الدادي
(Document Number of Corporation (if kn	own)	· • E	T.FL
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corp</i> its Articles of Incorporation:	poration adopts the following	ng amendmen	t(s) to
A. If amending name, enter the new name of the corporation:			
EQUANIMITY TECHNOLOGIES INC		The new	
name must be distinguishable and contain the word "corporation," "company," or "inco "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corp "chartered," "professional association," or the abbreviation "P.A."		ion "Corp.,"	
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, ent new registered agent and/or the new registered office address:	er the name of the		
Name of New Registered Agent		_	
(Florida street address)			
New Registered Office Address:	Florida		
(City)	(Zip	Code)	
New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the	(Zip		
Signature of New Registered Agent, if a	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	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				<u> </u>
4) Change		_		
Add				
Remove				
5) Change		Pr		
Add				
Remove				
6) Change		_		
Add			. 	
Remove				

(Attach addition	or adding additional Artic onal sheets, if necessary).	(Be specific)			
 -				_	
			-		
					
					<u> </u>
_					<u> </u>
<u> </u>					
		.			
_					
					
F. <u>If an amendr</u>	nent provides for an excha	inge, reclassificat	ion, or cancellatio	on of issued shares,	
provisions f	or implementing the amen oplicable, indicate N/A)	dment if not cont	tained in the ame	ndment itself:	
(i) noi aj	plicuble, indicale NIA)				
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<u> </u>					
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					· · · · · · · · · · · · · · · · · · ·

	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file dat	e)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requireme Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the are sufficient for approval.	mendment(s)
	approved by the shareholders through voting groups. The follow for each voting group entitled to vote separately on the amendment	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	."	
, <u> </u>	(voting group)	
07/01/20 Dated	022	
Signature	Malla	
sele	a director, president or other officer – if directors or officers have cted, by an incorporator – if in the hands of a receiver, trustee, or ointed fiduciary by that fiduciary)	
	MARK CROSS EA	
	(Typed or printed name of person signing)	***
	INCORPORATOR	
	(Title of person signing)	