## P22000046960

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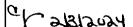




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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: DIV 3 Weapons, In	nc	
DOCUMENT NUM	P22000046960		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Gage Marsil		
		Name of Contact Pers	on
	DIV 3 Weapons, Inc		
		Firm/ Company	
	1460 South Leavitt Ave		•
		Address	
	Orange City, FL 32763		
		City/ State and Zip Co	de
	gmarsil@division3weapons.c	com	
	E-mail address: (to be us	sed for future annual repo	rt notification)
For further informatio	n concerning this matter, pleas	se call:at (	774-1020 Ext 232
Name	of Contact Person	at ( Area (	Code & Daytime Telephone Number
	or the following amount made		•
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 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	ding Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Ame Divis The 2415	et Address Inducent Section Ission of Corporations Centre of Tallahassee In Monroe Street, Suite 810 Inducent Fluid Section 10 Address 10 Addre

## Articles of Amendment to Articles of Incorporation of

DIV 3 WEAPONS, INC

2024 JULI 1 AH 7: 52

(Name of Corporation as currer	ntly filed with the Florida Dept. of State)
P22000046960	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corporation:	
Division 3 Weapons, Inc	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: (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 ad new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida :	street address)
New Registered Office Address:	(City) (Zip Code)
	(City) (Zip Cone)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia.	
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. Presiden; 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 Doe	
X Remove	$\underline{\underline{V}}$	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l)Change	D	Riley Mitchell	1440 SOUTH LEAVITT AVENUI
X Add			ORANGE CITY, FL 32763
Remove			
2) Change		_	
Add			
Add			<del></del>
Remove			
4) Change		_	
Acd			
Remove			
5) Change			
\aa			
Aemove			
6) Change		_	
Add			
Remove			

E. If amending or adding additional Articles, enter chan	ge(s) here:
(Attach additional sheets, if necessary). (Be specific)	
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F. If an amendment provides for an exchange, reclassific	cation, or cancellation of issued shares,
provisions for implementing the amendment if not c	ontained in the amendment itself:
(if not applicable, indicate N/A)	
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01/01/2024 The date of each amendment(s) adoption: \_\_ , 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 does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) ■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes east for the amendment(s) was/were sufficient for approval (voting group) Dated\_ Signature (By a director president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Gage Marsil (Typed or printed name of person signing) CFO

(Title of person signing)