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(Requestor's Name)			
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(Cit	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	ne)	
<u>(Do</u>	cument Number)		
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C-27-4 C-1	0-45		
Certified Copies	_ Centificates	s of Status	
Special Instructions to	Filing Officer:		
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: SOLUS PRO	PERTY SERVICES	INC.		
DOCUMENT NUMBE	ER: P22000052760				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
		Sonia Becerra			
_	. <u>.</u>	Name of Contact Person	1		
	Swyft Filings				
_		Firm/ Company			
	3 Greenway Plaza #1320				
_	Address				
	Houston, TX 77046				
_		City/ State and Zip Cod	e		
	anthon	ydperez10@gm	nail.com		
_	E-mail address: (to be us	sed for future annual report	notification)		
	concerning this matter, pleas	se call:	777 0470		
Sonia Becerra		at (777-0450		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:		
X \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address			Address		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee			
Tallahassee FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

SOLUS PROPER	RTY SERVICES INC.	
(Name of Corporation as current	ly filed with the Florida D	ept. of State)
P220000	052760	
	of Corporation (if known)	
Pursuant to the provisions of section 607.1006. Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
Zero Fift	y Co.	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	d" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		name of the
Name of New Registered Agent		11000
(Florida sti	reet address)	
New Registered Office Address:		, Florida
The wine gibber to the first state of the st	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar		ons of the position.

Signature of New Registered Agent, if changing

Check if applicable

 \Box The amendment(s) is/are being tiled 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.

Example:

X Change	177	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
<u>Evpe of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			****
Add			
Remove			
2) Change			
Add			 .
Remove 3) Change			
Add			
Remove			
I) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

The date of each amendment(s) adoption:	8/12/2022	. if other than the
date this document was signed.		It viner than the
Effective date <u>if applicable</u> :		
(n	to more than 90 days after amendment file date)	
Note: If the date inserted in this block does not a document's effective date on the Department of Sta	meet the applicable statutory filing requirements, this ate's records.	date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)	
The amendment(s) was/were adopted by the inecaction was not required.	orporators, or board of directors without shareholder a	action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for appropriate the shareholders was/were sufficient for approximation.	reholders. The number of votes cast for the amendme roval.	ent(s)
	nareholders through voting groups. The following state oup entitled to vote separately on the amendment(s):	ement
"The number of votes cast for the amendm	nent(s) was/were sufficient for approval	
by		
(voting	group)	
	12022 It or other officer – If directors or officers have not becorator – if in the hands of a receiver, trustee, or other enthal fiduciary)	
$ \bigcap_{\Gamma_{\mathrm{yp}}}$	ped or printed name of person signing)	
(Titl	President le of person signing)	

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