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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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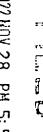
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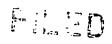
COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPO | BLUE DRAGON RATION: | SERVICES, INC. | |
|--|---|--|---|
| DOCUMENT NUMI | P22000080613 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: | |
| | JOHN S. BIALLAS, ATTOR | NEY AT LAW | |
| | , , , | Name of Contact Perso | n |
| | 3N918 SUNRISE LANE | Firm/ Company | |
| | ST, CHARLES, ILLINOIS 6 | Address 0174 | |
| | | City/ State and Zip Cod | le |
| | JSB70@PROTONMAIL.CO |)M | |
| | E-mail address: (to be us | sed for future annual report | t notification) |
| For further informatio | n concerning this matter, pleas | se call: | |
| JOHN S, BIALLAS | | 630 at (| 561-6252 |
| Name (| of Contact Person | | ode & Daytime Telephone Number |
| Enclosed is a check to | 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) | 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 Division The C | Address Idment Section on of Corporations Ientre of Tallahassee N. Monroe Street, Suite 810 |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



BLUE DRAGON SERVICES, INC.

2022 NOV 28 PH 5: 55

| (Name | of Corporation as currently | filed with the Florida De | pt. of State) |
|--|----------------------------------|-------------------------------|--------------------------------------|
| P22000080613 | | | TALL SERVICE |
| | (Document Number of | Corporation (if known) | |
| Pursuant to the provisions of section 607 its Articles of Incorporation: | .1006, Florida Statutes, this F | lorida Profit Corporation | adopts the following amendment(s) to |
| A. If amending name, enter the new n N/A | ame of the corporation: | | The same |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association," | Corp," "Inc," or "Co". A | | |
| B. Enter new principal office address, | if applicable: | N/A | |
| (Principal office address MUST BE A S | | | |
| | | | |
| | | | |
| C. Enter new mailing address, if appl (Mailing address MAY BE A POST | | N/A | |
| (Matting address MAT BE A FOST | OFFICE BOX) | | |
| | | | |
| | | | |
| D. If amending the registered agent ar | | ess in Florida, enter the na | ame of the |
| new registered agent and/or the ne | w registered office address: N/A | | |
| Name of New Registered Agent | | | |
| | | | |
| | (Florida stree N/A | et address) | |
| New Registered Office Address: | | <u> </u> | , Florida |
| | !0 | City) | Zip Code) |
| | | | |
| New Registered Agent's Signature, if o | | | |
| I hereby accept the appointment as regis | tered agent. I am familiar wi | ith and accept the obligation | ons of the position. |
| | | | |
| | <u> </u> | | |
| | Signature of New Reg | gistered Agent, if changing | |
| Check if applicable | | | |
| \square The amendment(s) is/are being filed p | oursuant to s. 607.0120 (11) (e | e), F.S. | |

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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 = Chie 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 | <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 | <u>Name</u> | Address |
| | VS | JOHN S. BIALLAS | 3N918 SUNRISE LANE |
| 1) Change X Add | | | ST. CHARLES, IL 60174 |
| Remove | | | |
| 2) Change | T | RICHARD J. HOLLANDER | 5278 GOLDEN GATE PARKWAY |
| X Add | | | STE 2 |
| Remove 3) Change | | | NAPLES, FL 34116 |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | · |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| N/A | icles, enter change(s) here: (Be specific) |
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| F. If an amendment provides for an exch | tange, reclassification, or cancellation of issued shares, |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| provisions for implementing the ame (if not applicable, indicate N/A) | nange, reclassification, or cancellation of issued shares, indment if not contained in the amendment itself: |
| provisions for implementing the ame (if not applicable, indicate N/A) | endment if not contained in the amendment itself: |
| provisions for implementing the ame (if not applicable, indicate N/A) | nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| provisions for implementing the ame (if not applicable, indicate N/A) | endment if not contained in the amendment itself: |
| provisions for implementing the ame (if not applicable, indicate N/A) | endment if not contained in the amendment itself: |
| provisions for implementing the ame (if not applicable, indicate N/A) | endment if not contained in the amendment itself: |
| provisions for implementing the ame (if not applicable, indicate N/A) | endment if not contained in the amendment itself: |
| provisions for implementing the ame (if not applicable, indicate N/A) | endment if not contained in the amendment itself: |
| provisions for implementing the ame | endment if not contained in the amendment itself: |
| provisions for implementing the ame (if not applicable, indicate N/A) | endment if not contained in the amendment itself: |

| • | NOVEMBER 11, 2022 | |
|---|---|----------------------|
| The date of each amendment(s) ac | loption: | , if other than |
| date this document was signed. | | |
| NOV | /EMBER 11, 2022 | |
| Effective date if applicable: | | |
| • | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this bidocument's effective date on the De | lock does not meet the applicable statutory filing requirements, this date w partment of State's records. | ill not be listed as |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| ☐ The amendment(s) was/were ado action was not required. | pted by the incorporators, or board of directors without shareholder action ar | nd shareholder |
| ■ The amendment(s) was/were ado by the shareholders was/were su | pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval. | |
| | roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): | |
| "The number of votes cast N/A by | for the amendment(s) was/were sufficient for approval | |
| 0, | (voting group) | |
| NOVEMBI Dated | ER 18, 2022 | |
| Signature Standard | Jarysos Bislas ector, posident or other officer – if directors or officers have not been | |
| selected | l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary) | |
| | MARYROSE BIALLAS | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |