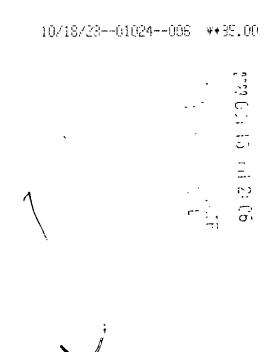
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(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Doc	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to F	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	DRATION: A-1 Global Holdin	gs, Inc.		
DOCUMENT NUN	1BER:		 	
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	tter to the following:		
	Tom Sennott			
		Name of Contact Persor	1	
	A-1 Global Holdings, Inc.			
	Firm/ Company			
	4451 St Lucie Blvd.	• •		
	Address			
	Fort Pierce, FL 34946			
	City/ State and Zip Code			
	tom.sennott@alindustries.co	m		, ,
	-	sed for future annual report	notification)	
	is man address, (to be de	ter ioi iuture ummur report	nouncum,	(E)
For further informat	ion concerning this matter, pleas	se call:		8
Jessica Fornaro		at (772	409-1111 ext 300	<u> </u>
Nam	e of Contact Person	Area Co		<u>-</u> 66
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	F-1
S35 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)	
Ai Di	ailing Address mendinent Section evision of Corporations O. Box 6327	Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee	

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

A-1 Global Holdings, Inc.

(Name of Cornoration as currently	filed with the Florida Dept, of State)	
(Name of Corporation as currently	med with the Frontia Dept. of State	
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following	amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "co". Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A."		
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)		- 2
(Manual Manual M		
	- 	
		 - <u>-</u>
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:		Ξ.
· · ·		<i>i</i> ;;
Name of New Registered Agent		FIG. 8
(Florida stre	oot addross)	• •
New Registered Office Address:	(City) , Florida (Zip C	ode)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w.		
Signature of New Re	egistered Agent, if changing	
•	gistered agent, y enungaig	
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)

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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Robert Jardim	4451 St Lucie Blvd.
X Add	-	-	Fort Pierce, FL 34946
Remove			
2) Change		<u> </u>	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			7 7 7
5) Change			
Add			
Remove			
6) Change			 -
Add			
Remove			

f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)		
		_
		_
		_
	<u> </u>	_
		_
	<u>. </u>	
	<u> </u>	_
	. ;	
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	<u> </u>	
provisions for implementing the amendment if not contained in the amendment itself:		
(if not applicable, indicate N/A)		
	<u>— — 2</u>	
		_

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8/15/23	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
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 document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	shareholder
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 cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
Signature Noun 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)	
Tom SENNOTT (Typed or printed name of person signing)	- <u>C</u>
	<u></u>
TREASURER (Title of person signing)	
(Title of person signing)	
·	ιö
	- <u> </u>