

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

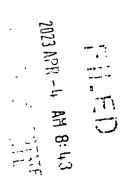
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6/14/23 VIM



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SOLIO P	ro Audio	
DOCUMENT NUMBI	D	4430	
The enclosed Articles o	f Amendment and fee are sub	omitted for filing.	
Please return all corresp	ondence concerning this mat	tter to the following:	
	+0,000	0101000	
_	reresc	Name of Contact Person	
-		Firm/ Company	
_	16854 NV	V 89 C+	
-	M(ami P	City/ State and Zip Code	2
	terry a soflor	naineverts. Longed for future annual report	
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Teresa 1	UGVGYM	at (786	554-7810
Name o	Name of Contact Person at (780) 554-7810 Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
Ame Divis P.O.	ing Address indment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	10 AUDIU		
(Name of Corp	oration as currently f	iled with the Florida Dept.	of State)
1)	Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, I its Articles of Incorporation:	Torida Statutes, this Fl	orida Profit Corporation ado	pts the following amendment
A. If amending name, enter the new name of	the corporation:		
Soflo Pro Event	Gear Inc.		The new
name must be distinguishable and contain the wo "Inc.," or Co.," or the designation "Corp." "chartered," "professional association," or the	"Inc," or "Co". A p	mpany," or "incorporated" o professional corporation nat	r the abbreviation "Corp.," ne-must-contain the word
B. Enter new principal office address, if appl	icable:	7875 W 2 Ct	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		Bay # 2	
		Higlegh, FL	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		16854 NW 8	59 ct
		Miami Lakes	FL 33018
D. If amending the registered agent and/or renew registered agent and/or the new registered agent and/or the new registered Agent	tered office address:	cx pay #2	e of the
New Registered Office Address:	Hialeah FL	ity)	Florida 33014 (Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered as	gent. I am familiar wi	th and accept the obligations	of the position.
Check if applicable ☐ The amendment(s) is/are being filed pursuan	a 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> <u>Mike</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	<u>s Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CEO	Edward Navarro	16854 NW 89 CH!
Add			Miami lales FL 3308
Remove			110854 NW 89 Ct
2) Change	<u>C00</u>	Teresita Navarro	Miami Lalles, FL 33019
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional A ttach additional sheets, if necessary,). (Be specific)			
				. <u> </u>
	<u> </u>			
				
	·			
	_ .			
		<u></u>		
				<u> </u>
an amendment provides for an e	xchange, reclassificatio	n, or cancellation o	<u>f issued shares,</u>	
provisions for implementing the a	<u>mendment if not conta</u>	ined in the amendn	<u>ient itself:</u>	
(if not applicable, indicate N/A)	!			
			· ,	
				
		<u>. </u>		
				
				<u></u>
				
			<u> </u>	<u> </u>
		. <u>. </u>		
				<u>. </u>

	loption:	, if other than th
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file a	1
	(no more than 90 days after amendment fite d	iate)
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirer partment of State's records.	ments, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sha	areholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the officient for approval.	e amendment(s)
□ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The folleeach voting group entitled to vote separately on the amend	owing statement lment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	3/24/23	
<u> </u>	3/24/23 Inca	
(By a d	irector, president or other officer – if directors or officers h d, by an incorporator – if in the hands of a receiver, trustee ted fiduciary by that fiduciary)	
	Tevesita Navayro (Typed or printed name of person signing)	
	(1 yped or printed name of person signing)	
	(Title of person signing)	