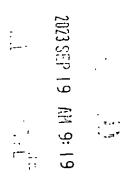
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: HB & SONS INC.		
DOCUMENT NUMB	ER: P23000011488		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	RAJAT VERMA		
-		Name of Contact Persor	
	RAJAT VERMA LLC		
-		Firm/ Company	
	PO BOX 212724		
•	·	Address	.
	ROYAL PALM BEACH, FL	, 33421-2724	
-		City/ State and Zip Code	c
	RAJAT.VERMA@CPA.CO	М	
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
RAJAT VERMA		561	8895325 de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 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 ndment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee V. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

HB & SONS INC.

(Name of Corporation as currently filed with the Florida Dept. of State) 2023 SEP 19 AH 9: 19 P23000011488 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: _The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "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) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) _, Florida_ New Registered Office Address: _ New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. 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. 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 Do	<u>oe</u>	
X Remove	<u>Y</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Si	nith	
Type of Action (Check One)	Title		<u>Name</u>	<u>Address</u>
1) Change	MGR		PATEL, AMIT	11205 Marina Bay Road
X Add		_		WELLINGTON
Remove				FL 33449
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		~
, 2 Add				
Remove				

	ding additional Arti sheets, if necessary).	(Be specific)			
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	provides for an exch	ange, reclassifica	tion, or cancellation	of issued shares,	
f an amendment	alama di antina	nameni ii noi con	tained in the amend	ment useu:	
f an amendment provisions for in (if not applic	plementing the ame				
f an amendment provisions for in (if not applic	plementing the ame thle, indicate N/A)				
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The date of each amendment	(s) adontion:		if other than the
date this document was signed.		· · · · · · · · · · · · · · · · · · ·	South man my
	08/27/2023		
Effective date <u>if applicable</u> :	(no more than 90 day	vs after amendment file date)	 -
	his block does not meet the applicable ne Department of State's records.	statutory filing requirements, this date will not	t be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
■ The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board	d of directors without shareholder action and sha	areholder
☐ The amendment(s) was/wer by the shareholders was/we	. ,	nber of votes east for the amendment(s)	
	e approved by the shareholders through d for each voting group entitled to vote.	voting groups. The following statement separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/were su	fficient for approval	
by		·•·	
	(voting group)		
08/ Dated	27/2023	_	
Signature			
(B)	y a director, president or other officer – lected, by an incorporator – if in the han pointed fiduciary by that fiduciary)		
	PATEL, HITESH		
	(Typed or printed name	e of person signing)	
	PRESIDENT		
	(Title of person signing	5)	