P23000022225

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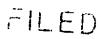


A. RAMSEY MAY 9. 2024

COVER LETTER

TO: Amendment Section Division of Corporations		r 🕖			
NAME OF CORPORATION: WINTECH GLOI	BAL INC				
DOCUMENT NUMBER: P23000022225					
The enclosed Articles of Amendment and fee are st	ubmitted for filing.				
Please return all correspondence concerning this ma	atter to the following:				
Timothy E Lavin					
	Name of Contact Person				
WINTECH GLOBAL INC					
	Firm/ Company				
2970 Easton Valley Road					
	Address				
Easton, NH 03580	1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 ·				
	City/ State and Zip Code	:			
tlavin@winspeed.com					
	sed for future annual report	notification)			
For further information concerning this matter, plea	se call:				
Tim Lavin	at (⁷²⁷	744-4184			
Name of Contact Person	Area Cod	le & Daytime Telephone Number			
Enclosed is a check for the following amount made	payable to the Florida Depa	rtment of State:			
\$35 Filing Fee \$Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fec Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amendi Division The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810 ssee, FL 32303			

Articles of Amendment to Articles of Incorporation of



WINTECH GLOBAL INC	2024 APR 23 PM 12 LO
(Name of Corporat	tion as currently filed with the Florida Dept. of State)
P23000022225	PLANAGE ELANG
(Docu	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florid ts Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the c	corporation:
	The new
name must be distinguishable and contain the word "c "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbr	corporation," "company," or "incorporated" or the abbreviation "Corp.," ," or "Co". A professional corporation name must contain the word reviation "P.A."
3. Enter new principal office address, if applicabl	
Principal office address <u>MUST BE A STREET AD</u>	DRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	ox) 2970 Easton Valley Road
	Easton, NH 03580
If amending the registered agent and/or register new registered agent and/or the new registered	ered office address in Florida, enter the name of the I office address:
Name of New Registered Agent	
Name of New Negistered rigen	
	(Florida street address)
New Registered Office Address:	(City) , Florida (Zip Code)
	(0.19)
lew Registered Agent's Signature, if changing Re	gistered Agent:
hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
Sion	nature of New Registered Agent, if changing
5.6.	, , , , , , , , , , , , , , , , , , , ,
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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones	
X Add	<u>\$V</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	VP	_	Kurt Amos	14280 S Military Trail
Add				Suite 7451
X Remove				DELRAY BEACH, FL 33482
2) Change				
Add				
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		-	·	
Add				
Remove				
6) Change		-		
Add				
Remove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
	
<u> </u>	
	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable indicate M/A)	
(if not applicable, indicate N/A)	
(y not applicable, materie WA)	
(y not applicable, matcale WA)	
(y noi applicable, maicale WA)	
(y noi applicable, maicale WA)	
(y noi applicable, maicale WA)	
(у пот аррисаоте, таксате тъх)	
(y noi applicable, maicale WA)	
(y not applicable, materie WA)	
(y noi applicable, maicale NIX)	
(y not applicable, matcale WA)	
(y not applicable, matcale WA)	

• • • • • •

The date of each amendment(s) adoption:		, if other than the
date this document was signed.		
Effective date if applicable:		J. and Gl. July)
	(no more than 90 days after am	nament file date)
Note: If the date inserted in this block does no document's effective date on the Department of	t meet the applicable statutory f State's records.	iling requirements, this date will not be listed as the
Adoption of Amendment(s) (CH	ECK ONE)	
The amendment(s) was/were adopted by the i action was not required.	ncorporators, or board of directo	rs without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the s by the shareholders was/were sufficient for a	harcholders. The number of vot pproval.	es cast for the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	shareholders through voting grogroup entitled to vote separately	ups. The following statement on the amendment(s):
"The number of votes cast for the amen	dment(s) was/were sufficient for	approval
by TIMOTHY E	LAVIN	
(voti	ng group)	
Dated 04/11/2024 Signature		
(By a director, presi	dent or other officer - if directors	or officers have not been
appointed fiduciary		0.701, 11 0000, 0.10=0.00
TIV	MOTHY E LA	AIVI
	Typed or printed name of person	
President		
	Fitle of person signing)	

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