## P23000070345

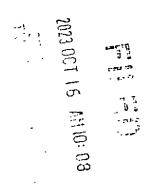
(Req	uestor's Name)			
(Add	ress)			
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(City/	/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Busi	iness Entity Nar	me)		
(Doc	ument Number)			
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
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## <u>COVER LETTER</u>

TO: Amendment Section  Division of Corpo				•
NAME OF CORPOR DOCUMENT NUMB	20000	re Midpoi	nt Connepts	Inc
The enclosed A <i>rticles o</i>	of Amendment and fee are sul	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
-	Nataliya	Name of Contact Person	lze	_
_	Native M	dopint bac	iople Inc	_
	285 a Mar	Firm Company		
	Verice =	1 31293		_
		City State and Zip Code	e	
-	E-mail address: (to be us	diction N (c) 0 1 ed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Natalin	a Veslapidze	at ( 9///		har
`				JC.
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artinent of State:	
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	Cl\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ing Address		Address	
	ndment Section ion of Corporations		lment Section on of Corporations	
	Box 6327		entre of Tallahassee	
Talla	hassee, FL 32314	2415 ?	N. Monroe Street, Suite \$10	

Tallahassee, FL 32303

DUEN IO CHAILE,	E II (1) III 4 II 1		
to Articles of Incor	poration		
Native allidpoint	Concepts Inc.		
(Name of Corporation as currently f	filed with the Florida Dept. of State)		
Pasoon	70.345		
(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this $Florida$ Statutes, this $Florida$ Articles of Incorporation:	orida Profit Corporation adopts the followin	g amendment(s) to	
A. If amending name, enter the new name of the corporation:	MA.	_The new	
name must be distinguishable and contain the word "corporation," "con "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", A p "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable:	mpany, " or "incorporated" or the abbreviation professional corporation name must contain $(\sqrt{\frac{1}{f}})$	n the word	
(Principal office address MUST BE A STREET ADDRESS )			
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	(h / l)	2023 OCT 16 AM	2 U U
D. If amending the registered agent and/or registered office address:  new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	M 10: 08	
Name of New Registered Agent $(\hat{N}/\hat{I})$		<u>.</u>	
New Registered Office Address: $(Florida\ stree)$	et address) Florida	_	
	Cuy) (Zip	Code	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wit	ith and accept the obligations of the position		

Signature of New Registered Agent, if changing

Executive Officer: CFO = President. Treasurer. Dir. Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove.	ector title by the first President: T= Treast Chief Financial Offi ector would be PTD in the following man wes the corporation,	wer: S= Secretary; E icer. If an officer/dire mer. Currently John Sally Smith is named	to Director; TR= Trus ctor holds more than o Doe is listed as the PS	stee: C = Chairman or Clerk: ( ne title, list the first letter of eac T and Mike Jones is listed as th ould be noted as John Doe, PT	n ogice near. Se V. There is
Example: X Change	PT John Doe				
X Remove	Y Mike Jone	<u>;</u> \$			
X Add	SV Sally Smit	<u>th</u>			
Type of Action (Check One)		Same		Address h	11 0
1) Change	PD c	Nataliya	Veshapidze	11	rguez-le Rd
X Add		Ú	1	Venice FL	<u>-</u>
Remove			-	34993	<del></del>
2) Change	<u> </u>				<del></del>
Add	A(A)				
Remove 3 ) Change			- <del></del>		
Add	(N)				
Remove	`' ''				
4)Change			<del>.</del>		<del></del>
Add	, N/A				
Remove	·				<del></del>
51 Change					
Add	N/A				<del></del>
Remove					
6) Change	$\frac{1}{N/A}$				<del></del>
Add	JU/H				

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)

\_\_\_\_ Remove

amending or adding additional Arti- ttach additional sheets, if necessary).	(Be specific)
an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
rovisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	h(i, j)
<u></u>	

The date of each amendment(s) adoption	n:	10/10/2023	, if other than the
date this document was signed.		'	
Effective date <u>if applicable</u> :	uno mora them 00 de	avs after amendment file dater	
	tho more man 90 ta	ays aper amenamem pre acuer	
Note: If the date inserted in this block d document's effective date on the Departm		le statutory filing requirements.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☑ The amendment(s) was-were adopted baction was not required.	by the incorporators, or boa.	rd of directors without sharehold	er action and shareholder
☐ The amendment(s) was were adopted by the shareholders was were sufficient		umber of votes cast for the amend	lment(s)
☐ The amendment(s) was were approved must be separately provided for each w			
"The number of votes cast for the	amendment(s) was/were s	sufficient for approval	
by	(voting group)		
	(voting group)		
Dated	12023 MV4		
Signature	~ Wul		
(By a director	president or other officer	- if directors or officers have not	been
	n incorporator— if in the hauciary)	ands of a receiver, trustee, or other	er court
арроппец па		17 1	
	Wataliya	VeS Na Did 26  ne of person signing)	
	(Typed or printed nan	ne of person signing)	
	(Title of person signin	າຣ໌)	