Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000017524 3)))



H240000175243ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 Phone : (844)449-3624 Fax Number : (844)449-3624

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:	
----------------	--

## COR AMND/RESTATE/CORRECT OR O/D RESIGN WELDSENSE CORP.



Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu Help

01/12/24 10:15AM 5125970678

## Articles of Amendment to Articles of Incorporation of

( <u>Name of Corporation as cu</u>	irrently filed with the Florid	la Dept. of State)	
24000001464			
(Document Nur	mber of Corporation (if know	n)	
ursuant to the provisions of section 607.1006, Florida Statute s Articles of Incorporation:	s, this Florida Profit Corpora	ation adopts the following a	nendment(s) to
. If amending name, enter the new name of the corporati	<u>ion:</u>		
			ie new
ame must be distinguishable and contain the word "corporation inc.," or Co.," or the designation "Corp," "Inc," or "Cochartered," "professional association," or the abbreviation	Zo". A professional corpore	rated" or the abbreviation ' ution name must contain th	Corp" se word
. Enter new principal office address, if applicable:	<u></u>		
Principal office address <u>MUST BE A STREET ADDRESS</u> )	)		
			<del></del>
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			2
(Maning and its <u>MIT DD (IT OUT OF IT DD )</u>			
. If amending the registered agent and/or registered office		the name of the	-
new registered agent and/or the new registered office ac	<u>aaress:</u>		:
Name of New Registered Agent			j ⊤ 1
(Flo	rida street address)		
New Registered Office Address:	(City)	, Florida	

Example:

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 Doe		
X Remove	Y	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	Address	
1) Change	D	Brian Keith Demarest Jr	256 Three Islands Boulevard	
X Add			арт. 207	
Remove			Hallandale Beach, FL 33009	
2) Change				
Add				
Remove 3.) Change				·. ·-
Add			1.00	-  (`
Remove				
4) Change				1
Add				_
Remove				
5) Change			-	
Add				
Remove				
6) Change				
Add				
Remove				

## 18506176383 Pg 4/5

01/12/24 10:15AM 5125970678

1124000017524.3

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
·		
		<del></del>
f an amendment provides for an excl	nange, reclassification, or cancellation of issued shares,	
if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
(i) not uppretante, materie insi)		
<del>-</del>	**************************************	·····

The date of each amendme	nt(s) adoption:	, if other than the
date this document was sign		
Effective date if applicable	:	
	(no more than 90 days after o	amendment file date)
Note: If the date inserted i document's effective date or	n this block does not meet the applicable statutor the Department of State's records.	ry filing requirements, this date will not be listed as the
Adoption of Amendment(s	) ( <u>CHECK ONE</u> )	
The amendment(s) was/wastion was not required.	ere adopted by the incorporators, or board of dire-	ctors without shareholder action and shareholder
	ere adopted by the shareholders. The number of were sufficient for approval.	votes cast for the amendment(s)
☐ The amendment(s) was/v must be separately prove	ere approved by the shareholders through voting a ded for each voting group entitled to vote separate	groups. The following statement ely on the amendment(s):
"The number of vo	tes east for the amendment(s) was/were sufficient	for approval
by	(voting group)	<u></u>
-	(voting group)	
Jan	pary 12th, 2024	
Dated	·	•
Signature	/s/ Brian Keith Demarcst Jr	
Signatore	(By a director, president or other officer – if direct selected, by an incorporator – if in the hands of a appointed fiduciary by that fiduciary)	
	Brian Keith Demarest Jr	; 
	(Typed or printed name of pers	ion signing)
	President	
	(Title of person signing)	