P2400031771

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TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Thermofilm Corp			_		
DOCUMENT NUM	1BER: P24000031771			_		
	es of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	Lissette B. Ortiz, Esq.					
		Name of Contact Person	1			
	Lissette B. Ortiz, PA					
		Firm/ Company				
	1430 S. Dixie Hwy Ste 321					
		Address				
	Coral Gables, FL 33146					
		City/ State and Zip Code	e			
	lawortiz@bellsouth.net			(2	2	
	E-mail address: (to be us	sed for future annual report	notification)		2024 1101	e
For further informati	ion concerning this matter, pleas	se call:		•	57 -5	•
Lissette B. Ortiz		at (<u></u>	665-5270		ñ: H	ŧ.
Name	e of Contact Person	Area Co	_) 665-5270 de & Daytime Telephone N	umber 📆		١
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	1	20	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
<u>M</u>	ailing Address	Street	Address			

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Thermofilm Corp		
(Name of Corporation as current	tly filed with the Florida Dept. of State)	
P24000031771		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following	g amendment(s) t
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contai	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		23
	,	, tr
D. 16 and the district of the second of the		
D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address		Si :
Name of New Registered Agent		
		· 1.72
(Florida s	treet address)	- 0
New Registered Office Address:	, Florida	
<u> </u>		Code)
New Registered Agent's Signature, if changing Registered Agen 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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change	<u>v</u>	Martha Rodriguez	2000 Metropica Way Apt 607
X Add			Sunrise, FL 33323
Remove			
2) Change	<u>v</u>	Federico Fortner Rodriguez	2000 Metropica Way Apt 607
X Add			Sunrise, FL 33323
Remove 3) Change	V	Victoria Fortner Rodriguez	2000 Metropica Way Apt 607
X Add			Sunrise, FL 33323
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ach additional sheets, if neces.	sary). (Be specific)				
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in amendment provides for a	in exchange reclassi	fication or cancel	ation of issued sh	gree	
ovisions for implementing th	e amendment if not	contained in the a	mendment itself:	in cat	
(if not applicable, indicate i	√/A)				
					
					
					

The date of each amendment(s date this document was signed.	adoption:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and shareholder
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	,"
	(voting group)
October Dated	29, 2024
Signature	director, president or other officer – if directors or officers have not been
sele	eted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Lissette B. Ortiz. Esq.
	(Typed or printed name of person signing)
	Attorney-in-Fact
	(Title of person signing)