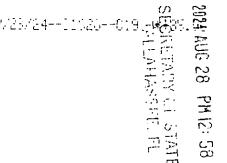
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: AQUATECH GLO	BAL SERVICES INC	
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Justin Owings		
		Name of Contact Person	1
		Firm/ Company	
	2071 SW 70th AVE STE G19)	
	DAVIE FL 333	Address	
	11 900	City/ State and Zip Code	2
	ADMIN@AQUATECHGLO	,	
	.,	ed for future annual report	notification)
		, ···	,
For further information	concerning this matter, pleas	se call:	
CARLOS BERNAL		954 at (de & Daytime Telephone Number
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r 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 Divi P.O.	ting Address Indment Section Ission of Corporations Box 6327 Ithassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

SECKELLEY CLISTA

Articles of Amendment to Articles of Incorporation of

AOUATECH GLOBAL SERVICES INC

AQUATECH GEOBAL SERVICES INC	a Charles and Charles and Charles
· · · · · · · · · · · · · · · · · · ·	s currently filed with the Florida Dept. of State)
P24000036213 (Document)	Number of Corporation (if known)
	•
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	stutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	<u>ration:</u>
	The new
	ration," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word ion "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRES	<u>SS</u>)
C. Enter new mailing address, if applicable:	三二 三
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	28
	<u> </u>
	PH C: 50
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	office address in Florida, enter the name of the
Name of New Registered Agent	
	(Florida street address)
None Book of AME and Address	. Florida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Register	
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
Chast: 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	PT	John Doc	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
Change	VP	PROTECH ASSOCIATES INC	18510 SW 58ST
Add			SOUTHWEST RANCHES
X Remove			FL 33332
2) Change	VP	PAU-GLAM AND BEAUTY LLC	6170 SW 195th AVE
Add			FORT LAUDERDALE
X Remove 3) Change			FL33332 SECTEDARY OF STATE SECTEDARY OF STATE
Add			
Remove			HASS C
4) Change			
Add			FILE S8
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	(DC specific)			
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			RECRETATION OF TALLAHASSEE	
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an amendment provides for an exch	ance reclassification or can	cellation of issued share	. 53	~ ~
provisions for implementing the ame	ndment if not contained in the	e amendment itself:	五	\sim \sim
(if not applicable, indicate N/A)			<u> </u>	0 1
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	6/29/2024	
The date of each amendi		, if other than the
date this document was si-	gned.	
	5/21/2024	
Effective date <u>if applical</u>	ole: (no more than 90 days after amendment file date)	
	I in this block does not meet the applicable statutory filing requirements, this on the Department of State's records.	date will not be listed as the
Adoption of Amendmen	t(s) (CHECK ONE)	
The amendment(s) was action was not required	were adopted by the incorporators, or board of directors without shareholder ac	tion and shareholder
	were adopted by the shareholders. The number of votes cast for the amendment as/were sufficient for approval.	nt(s)
	s/were approved by the shareholders through voting groups. The following state ovided for each voting group entitled to vote separately on the amendment(s):	ment
"The number of	votes cast for the amendment(s) was/were sufficient for approval	
by	·	
	(voting group)	
8/	/19/2024	
Dated_	 _	_
		SECREMAN SECREMAN
Signatu	re	
•	(By a director, president or other officer - if directors or officers have not been	
	selected, by an incorporator – if in the hands of a receiver, trustee, or other co	un CE 2
	appointed fiduciary by that fiduciary)	生品。
	Justin Quins	MUG 28 PH 12: 58
	(Typed or printed name of person signing)	med 15
		7F 8
	TRESIDENT.	E
	(Title of person signing)	