P2500018014

(Req	uestor's Name)	
(Add	ress)	
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(City)	/State/Zip/Phone	e #)
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(Doc	ument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Tryp Bug		
	1BER: P25000018014		
	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	Mike Davis		
		Name of Contact Persor	1
	Tryp Bug		
		Firm/ Company	
	2400 Orange Ave Unit 5104		
	-	Address	
	Cleveland OH 44101		
		City/ State and Zip Code	2
	legal_docs@trypbug.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
Mike Davis		at (216) 532-3301 de & Daytime Telephone Number
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ai Di P.	ailing Address mendment Section vision of Corporations O. Box 6327 dlahassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

Tryp Bug Inc	2025 JUN 13 AM 10: 50		
(Name of Corporation as current	tly filed with the Florida Dept, of State)		
P25000018014	·		
(Document Number of	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 amendment(s) to		
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.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word		
B. <u>Enter new principal office address, if applicable:</u> (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)	2400 Orange Ave		
	Unit 5104		
	Cleveland OH 44101		
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres			
Name of New Registered Agent			
Allowide of	treet address)		
New Registered Office Address:	City (Zip Code)		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	<u>t:</u> with and accept the obligations of the position.		
Signature of V we	Registered Agent, if changing		
Signature of New 1	медалется мусти, у стануту		

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 Doe X Remove \underline{V} Mike Jones X Add 5VSally Smith Type of Action <u>Title</u> Name 1 <u>Address</u> (Check One) Mike Davis 2400 Orange Ave 1) ____ Change Unit 5104 _ Add Cleveland OH 44101 ____ Remove Ciro Isernia 2400 Orange Ave 2) ____ Change Unit 5104 Add Cleveland OH 44101 __ Remove 3) ____ Change ____ Add ___ Remove 4) ____ Change ____ Add __ Remove 51 ____ Change Add __ Remove 6) Change __ Add _ Remove

(Attach additi	or adding additional Articles, onal sheets, if necessary). (Be	specific)	_	
				
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If an amenda	nent provides for an exchange	, reclassification, or	cancellation of issued	i shares.
provisions t	or implementing the amendme opticable, indicate N/A)	ent if not contained	in the amendment its	<u>elf:</u>
(4) 111/1 (4)	ηπιταίνε, marcaic (621)			
_				

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this locument's effective date on the D	block does not meet the applicable statutory filing requirements, this capartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder ac	tion and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendmen ufficient for approval.	nt(s)
	proved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cas	for the amendment(s) was/were sufficient for approval	د۔
by		7025 JUH 13 MM 10: 50
	(voting group)	
6/10/2025		To the
Dated	_ .	呈 己
Si	$\Lambda \longrightarrow$	Ģ.
Signature <u>(/ </u> (By a c	lirector, president or other officer – if directors or officers have not been	
selecte	ed, by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	urt
	Mike Davis	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·

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