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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: VOLTCASH INC). 		
DOCUMENT N	UMBER: P93000052436			
	cles of Amendment and fee are su	bmitted for filing	3.	
Please return all c	orrespondence concerning this ma	tter to the follow	ing:	
	MIGUEL BUENO			
	VOLTCASH INC.	Name of Con	tact Persor	1
		Firm/ Co	mpany	
	703 NW 62ND AVE. SUITE	# 230		
		Addr	ess	
	MIAMI, FL 33126			
	·	City/ State an	d Zip Code	:
	MBUENO@VOLTCASH.CO	ЭМ		
	E-mail address: (to be us	sed for future and	nual report	notification)
	nation concerning this matter, pleas	se call:	205	225 2050 FWT (212)
	RCIA-BAYLLERES	at (305	
Na	ime of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a chec	ck for the following amount made	payable to the Fl	orida Depa	artment of State:
□ \$35 Filing Fe	e □\$43.75 Filing Fee & Certificate of Status	S43.75 Filir Certified Co (Additional c enclosed)	py opy is	■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

VOLTCASH INC.	
(Name of Corporation as currently	y filed with the Florida Dept, of State)
P93000052436	
(Document Number of	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendmen
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
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:	20 SE AL
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address:	
Name of New Registered Agent	
(Florida stre	eet address)
New Registered Office Address:	
t e	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar w	
Signature of New Re	egistered Agent, if changing
Check if applicable	

 \square 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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	JORGE JARAMILLO RAMIREZ	703 NW 62ND AVE. SUITE#230
X Add			MIAMI. FL 33126
Remove			
2) Change		VOLTCASH INC.	703 NW 62ND AVE SUITE#230
Add			MIAMI, FL 33126
X Remove 3) Change			
Add			
Remove			
4) Change			CONTROL TO
Add			(62) J. I
Remove			
5) Change			0: 5 3
Add			
Remove			
6) Change			-
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary), (Be specific)			
			_
			-
W-7			
·			
	F. 5	Ν.	
	الميار – ما و جاوي	20 F	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	20 A	FEB	
(if not applicable, indicate N/A)	젊호	Ϋ́	1
N/A	``S	100	
	E 27	AH IO:	,
	_ <u>34</u> _	_ဌ	

The date of each amendment(s) ad	JULY, 2019 option:	, if other than the
date this document was signed.		
Effective date if applicable:	(1) (1) 1 vi vi v	and the Land
	(no more than 90 days after amendme	ni jue aaie)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing roartment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	oted by the incorporators, or board of directors with	nout shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were suf	oted by the shareholders. The number of votes cast ficient for approval.	for the amendment(s)
	roved by the shareholders through voting groups. The each voting group entitled to vote separately on the	
"The number of votes cast (or the amendment(s) was/were sufficient for appro	val
by		
	(voting group)	
spected	rector, president or other officer – if directors or off, by an incorporator – if in the hands of a receiver, and fuluciary by that fiduciary)	
	MIGUEL BUENO	
-	(Typed or printed name of person signin	g)
	PRESIDENT	
	(Title of person signing)	FILED 20 FEB -5 AM IO: SLOKE FALL (SES) FALL (BASSET, FLO)