P96000 34065

(Re	equestor's Name)	
V	,	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: EASTCOAST AP	PLICATORS INC.			
DOCUMENT NUMI	096000034065	······································			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	Liliana M Cadavid				
		Name of Contact Person	1		
	Exodo USA LLC				
	Firm/ Company				
	300 S. Pine Island Road- Suite 201				
	Address				
	Plantation, Florida. 33324				
		City/ State and Zip Cod	e		
T C-4	:404				
LCad	avid@exodousa.com	16.6.	10		
	E-mail address: (to be u	sed for future annual report	notification)		
For further information	n concerning this matter, plea	se call:			
Nicholas P. Adams		at (305	7723975		
Name o	of Contact Person Area Code & Daytime Telephone Number		de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:		
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

EAST COAST APPLICATORS, INC.				
	of Corporation as curren	ntly filed with the Florida Dept, of Sta	atę)	
P9600034065				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corporation adopts the	e following amendment(s	i) to
A. If amending name, enter the new n	ame of the corporation;			
			The new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corporation ne		
B. Enter new principal office address, if applicable:		2284 Wilhelmina Court NE		
(Principal office address MUST BE A S		Suite D	State of	
		Palm Bay, Florida. 32905	多 男 刊	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2284 Wilhelmina Court NE	かに	\ 3
			<u> </u>	•
D. If amending the registered agent an new registered agent and/or the ne			<u>ıe</u>	
Name of New Registered Agent	Liliana M Cadavid- Exodo USA LLC			
	300 S Pine Island Road-	Suite 201		
	(Florida .	street address)		
New Registered Office Address:	Plantation	, Florid	33324	
Now Register to Office Hour esq.		(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			position.	
	Burtadand	A		
	Signature of New	Registered Agent, if changing		

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 <math>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)	Title	Name	Address
1) Change	P	Mayra Reimer	9888 Majorca Place
Add x Remove			Boca Raton, Florida. 33434
2) X Change	P	Nicholas Adams	1245 Palm Bay Rd
Add			Apt. I- 102
Remove			Palm Bay, Florida. 32905
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
None		
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: (if not applicable, indicate N/A)		
ECA SOLUTIONS LLC. is owner of 100% of shares		
		

	April 2, 2018	
The date of each amendmen date this document was signed		, if other than the
_	April 2, 2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date he Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statemened for each voting group entitled to vote separately on the amendment(s):	rt.
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated	Pell 2, 2018)	
Signature		
(<u>i</u>	By a directors or officers have not been	
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	DPCHOLAS P. ASALIS	· · · · · · · · · · · · · · · · · · ·
	(Typed or printed name of person signing)	
	Pessysen	
	(Title of person signing)	