## P9100030125

(Re	equestor's Name)	<del></del>		
(Ac	ldress)			
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION:	ECTRIX US	A. Luc
DOCUMENT NUMBE	_	030125	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
		PETER A COR	41ULIA C
_		ELECTRUX U	sk, luc.
		Firm/ Company	
_	<del></del>	411 AW 13	2 STREET, UNIT D
_		Ola Locca, f City/ State and Zip Cod	FL 33054
	E-mail address: (to be us	ETEL D PETRO sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
PETER A	Corpulac	at ( 30 S	6.85-8282 de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	ariment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 assee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building
i difali	43300, 116 34314	2001 8	xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

## FILED

2018 NOV -8 PM 3: 14

(Name of Corporati	on as currently file	d with the Florida Dep	t. of State)	HOLLTARY OF ST TALLAHASSEE, F
,	ELECTON	1154 \		TALLAHASSEE
(Docun	nent Number of Con	USA, NC	•	<del></del>
arsuant to the provisions of section 607.1006, Florida Articles of Incorporation:	Statutes, this <i>Flori</i>	ida Profit Corporation a	dopts the foll	owing amendment(s) to
If amending name, enter the new name of the co	rporation:			
				The new
ame must be distinguishable and contain the wor Corp.," "Inc.," or Co.," or the designation "Corp ord "chartered," "professional association," or the	." "Inc," or "Co".	A professional corpor	orated" or t ation name n	he abbreviation
Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADD</u>		<del> </del>		
		· · · · · ·		
	_		· · · · · · · · · · · · · · · · · · ·	<del></del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	(X)			
-	_			
		· · · · · · · · · · · · · · · · · · ·		
	_		<del>-</del>	
If amending the registered agent and/or registered new registered agent and/or the new registered	<u>red office address i</u> office address:	n Florida, enter the nai	me of the	
Tame of the Registered Agon	·····			
	(Florida street ac	(dress)	<del></del>	<del></del>
New Registered Office Address:			_, Florida	
	(City,	)		(Zip Code)
ew Registered Agent's Signature, if changing Reg	istered Agent			
ereby accept the appointment as registered agent.		and accept the obligation	ns of the posit	ion.
	C11 P	ered Agent if changing		<b></b> _

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	<u>Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	<u>: Jones</u>	
X Add	<u>SV</u> <u>Sail</u> y	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u> </u>	ALLAN P COZNILLAC	- 4111-D NW 132 STORES
X Add			OPA LOCKA TL 33054
Remove			
2) Change	C,T	PETER A CORNILLATE	139215W97 KUG
X Add			Minu, Fr. 33176
Remove 3)Change		PETER A CORMILIE	13921 SW 197 ANC
Add			Minni, Fc 33176
X Remove			
4) Change	<del></del>		
Add			
Remove			
5) Change		<del></del>	
Add			
Remove			
6) Change			
Add			
Remove			

Attach addition	adding additional Articl al sheets, if necessary).	(Be specific)				
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f an amendme	nt provides for an excha implementing the ameno	nge, reclassifica	tion, or cancellat	on of issued shar	es,	
(if not app	licable, indicate N/A)		various in the unit	Rememe Room.		
	_					
	,					
			<del></del>			
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The date of each amendment(s) adoption:	, if oth	er than the
date this document was signed.		
Effective date if applicable:		_
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does no document's effective date on the Department of S	of meet the applicable statutory filing requirements, this date will not be li- state's records.	sted as the
Adoption of Amendment(s) (CHE	ECK ONE)	
The amendment(s) was/were adopted by the sl by the shareholders was/were sufficient for ap	hareholders. The number of votes cast for the amendment(s) pproval.	
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amend	dment(s) was/were sufficient for approval	
by	D	
(voti	ing group)	
action was not required.  The amendment(s) was/were adopted by the in	ncorporators without shareholder action and shareholder	
action was not required.		
Dated 10 31 1	18	
Signature	1 an MIC	
(By a director, president)	dent or other officer - if directors or officers have not been reporator - if in the hands of a receiver, trustce, or other court by that fiduciary)	
	PETER & GRAILLIKE	
<del>(</del>	Typed or printed name of person signing)	_
	Diecotor	
	(Title of person signing)	