P98000069636

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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Hallcraft Machining Inc. DOCUMENT NUMBER: P98000009036
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tanya Severson Name of Contact Person Hallcraft Machining Inc Firm/ Company 1450 Chaffee Drive Address Titusville, Fl 32780 City/ State and Zip Code + Severson & responsive machining. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tanya Severson at (321) 225-4011 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee & S52.50 Filing Fee & Certificate of Status Certificate of Status (Additional copy is enclosed) S52.50 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

Articles of Amendment

to

Articles of Incorporation

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4	J	ı
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Halleraft Mach	ining The
(Name of Corporation as cur	rrently filed with the Florida Dept. of State)
DOGOODIANIO	2/4
(Document Num	Divide the control of
(Document Nam	of Corporation (II known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	on:
	or "Co". A professional corporation name must contain the ation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	1450 Chattee Drive Titus Ville, FL 32780
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1650 Chaffee Drive Titusville, FL 32780
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent	
(Flor	ida street address)
N D 1 100 11	C11.
New Registered Office Address:	, Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Registered A l hereby accept the appointment as registered agent. I am fam	
Signature of i	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 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 Do	<u>oe</u>		
X Remove	<u>v</u>	Mike Jo	<u>nes</u>		
X Add	<u>sv</u>	Sally Sr	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		Address
1) Change		_		_	
Add				-	
Remove				-	
2) Change				_	
Add				_	
Remove				-	
3) Change		_		_	
Add				_	
Remove				-	
4) Change		_		_	
Add				-	
Remove				-	
5) Change					
Add	-	_		-	
Remove				-	
6) Change		_		-	
Add				-	
Remove					

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	-	
If an amendment provides for an excl	ange, reclassification, or	cancellation of issued	shares.
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained i	in the amendment itsel	<u>f:</u>
			

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	zill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 11 06 2019	
Signature / Lely Man	
(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 court	
appointed fiduciary by that fiduciary)	
Helen McCourt (Typed or printed name of person signing)	
President	
(Title of person signing)	