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AERO SHADE TECHNOLOGIES, INC

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: _____ DOCUMENT NUMBER: P98000091498 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Fred L. Kretschmer, Jr., Esq. Name of Contact Person Brennan & Kretschmer Firm/ Company 1443 20th Street, Suite A Address Vero Beach, Florida 32960 City/ State and Zip Code fik@veroattomeys.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (772) 778-3777

Area Code & Daytime Telephone Number Fred L. Kretschmer, Jr., Esq. Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & \$52.50 Filing Fee ☐\$43.75 Filing Fee & \$35 Filing Fee Certified Copy Certificate of Status Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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Articles of Amendment to Articles of Incorporation of

| Acro Shade Technologies, Inc. | (I Ch) (I d) Florida Dant of Plats) |
|---|---|
| | ntly filed with the Florida Dept. of State) |
| P98000091498 | 60 3 701 |
| (Document Number | r of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, the ts Articles of Incorporation: | as Florida Profit Corporation adopts the following amendment(s) |
| 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 professional corporation name must contain the word |
| B. Enter new principal office address, if applicable: | |
| (Principal office address MUST BE A STREET ADDRESS) | |
| · | |
| | |
| C. Enter new mailing address, if applicable: | |
| (Mailing address MAY BE A POST OFFICE BOX) | |
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| | |
| | |
| D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add | nddress in Florida, enter the name of the ress: |
| | |
| Name of New Registered Agent | |
| (Florid | a street address) |
| (rioria | u street aaaressj |
| New Registered Office Address: | (City) , Florida (Zip Code) |
| | (City) (Zip Code) |
| | |
| New Registered Agent's Signature, if changing Registered Agent | gent: |
| I hereby accept the appointment as registered agent. I am famil | iar with and accept the obligations of the position. |
| | |
| | |
| Signature of Ne | sw Registered Agent, if changing |
| Signature of Ne | 200 A D0 |
| Check if applicable | (1) (A) F.C |
| ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (| (11) (c) , r.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 John Doc PT <u>v</u> Mike Jones X Remove <u>sv</u> Sally Smith <u>X</u> Add Address Type of Action Name Title (Check One) 3104-3106 Industrial Ave. Three Jean-Francois Manchec 1) ____ Change Fort Pierce, Florida 34946-8622 _ Add ____ Remove 2) ____ Change __ Add ___ Remove 3) ____ Change ___ Add Remove 4) ____ Change _ Add Remove

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| h additional sheets, if necessary). (Be specific) | here: |
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| n amendment provides for an exchange, reclassification | on, or cancellation of issued shares, |
| ovisions for implementing the amendment if not conta | ained in the amendment itself: |
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| The date of each amendment(s) date this document was signed. | 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 document's effective date on the | block does not meet the applicable statutory filing requirements, a Department of State's records. | his date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were a action was not required. | dopted by the incorporators, or board of directors without sharehold | er action and shareholder |
| The amendment(s) was/were a by the shareholders was/were | dopted by the shareholders. The number of votes cast for the amend sufficient for approval. | iment(s) |
| | approved by the shareholders through voting groups. The following sor each voting group entitled to vote separately on the amendment(s | |
| "The number of votes ca | ist for the amendment(s) was/were sufficient for approval | |
| by | | |
| | (voting group) | |
| 04/26/20 Dated | 21 | |
| Signature | director, president or other officer - if directors or officers have no | l been |
| selec | sted, by an incorporator if in the hands of a receiver, trustee, or oth inted fiduciary by that fiduciary) | |
| | Fred L. Kretschmer, Jr. | |
| | (Typed or printed name of person signing) | |
| | Attorney for Corporation | |
| | (Title of person signing) | |