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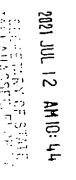
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	IN: DOLPHIN !	MEGHANICAL, INC	
DOCUMENT NUMBER:	P990000L	16365	
The enclosed Articles of Am			
Please return all corresponde	nce concerning this ma	tter to the following:	
	DAUIO	TUCKOI	
		Name of Contact Persor	1
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	5595	Read DAE Da	
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 1	TCKK	10015 @ A1M. Co sed for future annual report	notification)
	. man address, to be as	ou for fatal o almaar roport	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
For further information conc	erning this matter inlea	se call:	
for further miorination cone	orning and marrer, prea-	go carr.	
DAVID TO	OCICE!	at (941	1928-0005
Name of Con	tact Person	Area Co) 928-0005 de & Daytime Telephone Number
Enclosed is a check for the f	ollowing amount made	payable to the Florida Depa	artment of State:
S35 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)
P.O. Box 6	nt Section f Corporations	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assec, FL 32303

Articles of Amendment to Articles of Incorporation

FILED

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Delati Macha	اممنما	·Tua	2021 JUL 12	•.
Vol Phin Mecha (Name of Corpor	ation as currently	filed with the Flori	ida Dept. of State	AM 10: 45
Pagananauluau	E		MET TAKEY	25.35.44
1 190004636 (Doc	27 cument Number of	Corporation (if know	wn)	
				C 11
arsuant to the provisions of section 607,1006, Flor Articles of Incorporation:	rida Statutes, this F	lorida Profit Corpo	ration adopts the	following amendment(s)
. If amending name, enter the new name of the	e corporation:			
				The new
ame must be distinguishable and contain the word Inc.," or Co.," or the designation "Corp," "h chartered," "professional association," or the ab	nc," or "Co". A	ompany," or "incorp professional corpo	oorated" or the ab ration name mus	breviation "Corp.," et contain the word
Enter new principal office address, if applica	ible:			
rincipal office address MUST BE A STREET A	IDDRESS)			
. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	<u>BOX</u>)	<u> </u>		
 If amending the registered agent and/or reginew registered agent and/or the new register 			r the name of the	<u>:</u>
Name of New Registered Agent		<u>.</u>		
	(Florida stre	and a Library		
	trantaa sire	er auto esso		
New Registered Office Address:		(City)	Florida	(Zip Code)
	,	Cny		map conce
ew Registered Agent's Signature, if changing l	Registered Agent:			
hereby accept the appointment as registered agen	it. – Lam familia r w	rith and accept the o	bligations of the p	position.
<u> </u>	ignature of New Re	gistered Agent, if ch	nanging	
•	<u>.</u>		- -	

Check if applicable

[☐] 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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change		DONIEC P. Tucker	3401 SPAINWOOD DA SANASUTA, Fr. 34232
_ × Add			SANASUTA F. 34232
Remove			
2) Change			
Add			
Remove 3) Remove			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
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6) Change			
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	n of iccuad charge	
amendment provides for an exchange, reclassification, or cancellations for implementing the amendment if not contained in the amen	idment itself:	
if not applicable, indicate N/A)		
	<u> </u>	
		W
		- -

The date of each amendment(s) adoption: _date this document was signed.	4-15-2021	, if other than the
Effective date if applicable: 7-	(no more than 90 days after amendment file date	
	(no more than 90 days after amendment file date	9
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirement of State's records.	its, this date will not be listed as the
Adoption of Amendment(s)	HECK ONE)	
The amendment(s) was/were adopted by the action was not required.	e incorporators, or board of directors without sharel	nolder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient fo	e shareholders. The number of votes cast for the an rapproval.	nendment(s)
	the shareholders through voting groups. The following group entitled to vote separately on the amendme	
"The number of votes cast for the am	endment(s) was/were sufficient for approval	
by	35	
(ve	oting group)	
7 1 70	7 1	
Dated7-1-707	<u>. 1</u>	
Signature		
(By a director, pro	esident or other officer - if directors or officers have	not been
selected, by an in	corporator - if in the hands of a receiver, trustee, or	
appointed fiducia	ry by that fiduciary)	
7	DAVID W TUCKEN	
 -	(Typed or printed name of person signing)	
	PRESIDENT (Title of person signing)	
	(Title of person signing)	-