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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION: Control Manufactu	ring Assembly, Inc.				
	MBER: P99000071694		<u> </u>			
	cles of Amendment and fee are su	bmitted for filing.				
Please return all co	orrespondence concerning this ma	tter to the following:				
	Alydia Jackson					
	Name of Contact Person					
	Firm/ Company					
	380 N. Wickham Road, Unit	D				
	Melbourne, FL 32935	Address				
		City/ State and Zip Code				
	cmamelbfl@aol.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further inform	ation concerning this matter, plea	se call:				
Alydia Jackson		at (³²¹	751-0555			
Na	me of Contact Person	Area Coo	de & Daytime Telephone Number			
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	E S43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

P99000071694 (Document Number of Corp Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florid</i> its Articles of Incorporation:	oration (if known)		
(Document Number of Corp Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florid</i> its Articles of Incorporation:	•		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florid</i> its Articles of Incorporation:	•		
its Articles of Incorporation:	a Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
CMA 2.0, Inc.	7henew		
name must be distinguishable and contain the word "corporation," "compa- "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A profe "chartered," "professional association," or the abbreviation "P.A."	ny, " or "incorporated" or the abbreviation "Corp"		
B. Enter new principal office address, if applicable:	380 N. Wickham Road, Unit D		
(Deinging) office address MIST RE A STREET ADDRESS	Melbourne, FL 32935		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 380) N. Wickham Road, Unit D		
•	bourne, FL 32935		
D. If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	Florida, enter the name of the		
Name of New Registered Agent	···		
	Γ		
(Florida street ada	ress)		
New Registered Office Address:	, Florida		
(City)	(Zip Code)		

Check if applicable

 \square 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.

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	g or adding additi itional sheets, if neo	cessary). (B	e specific)				
-						<u>.</u>	
							
							
							
		<u></u>		<u> </u>			
						_	
			<u>-</u>				
							_
an ameno	dment provides fo	or an exchang	e, reclassificat	ion, or cancella	tion of issued s	hares,	
provisions	for implementing	g the amendm	ent if not con	tained in the am	<u>iendment itself</u>	<u>:</u>	
(ij not	applicable, indica	ie N/A)					
					<u>.</u>		
					<u> </u>		
					<u></u>		

•

December 23, 2020	
	other than the
date this document was signed.	
December 23, 2020	
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 will not be document's effective date on the Department of State's records.	ne listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and share action was not required.	holder
■ 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 Shareholders"	
(voting group)	
Signature (By a director) plesident 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 iduciary by that fiduciary) Alydia Jackson (Typed or printed name of person signing) President	
(Title of person signing)	