# 299000097690

(Rec	questor's Name)	
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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: \_\_\_\_\_

DOCUMENT NUMBER: \_\_\_\_\_

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Contact Person

Firm' Company

Address

City/ State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Contact Person

\_ at (\_\_\_\_\_\_) \_\_\_\_\_ Area Code & Davime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## FILED

2021 JAN -4 AM 10: 34

Articles of Amendment

to Articles of Incorporation of

SECRETARY OF STATE TALLAHASSEE, FL

#### ACUANTIA, INC.

#### (Name of Corporation as currently filed with the Florida Dept. of State)

P99000097690

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607,1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

#### A. If amending name, enter the new name of the corporation:

N/A		The new
name must be distinguishable and contain the word "corporat "Inc.," or Co.," or the designation "Corp," "Inc." or "C "chartered," "professional association," or the abbreviation	Co". A professional corpor	orated" or the abbreviation "Corp.,"
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>	N/A	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	N'A	
D. <u>If amending the registered agent and/or registered offi</u> new registered agent and/or the new registered office a		the name of the
Name of New Registered Agent		
	orida street address)	
<u>New Registered Office Address:</u> NIA		, Flonda (Zip Code)
<u>New Registered Office Address</u> :	(City)	

eby accept the appointment as registered agent. I am familiar with and accept the obligations of the position,

Signature of New Registered Agent, if changing

: if applicable

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:

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P = President; V= Vice President;  $\hat{T}=$  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 $\mathbf{PT}$ John Doe X Remove Ύ. Mike Jones . <u>X</u> Add <u>SV</u> Sally Smith Address Type of Action Title Name (Check One) Р GONZALO URIBE LEBRIJA 1) X Change . . . . . . . . \_\_\_\_\_ Add \_\_\_\_ Remove Т ROSA M. CASTRO 2) \_\_\_\_ Change Х \_\_\_\_Add \_\_\_\_ Remove JACINTO SIC S 3) \_\_ Change Х Add \_\_\_\_ Remove Р VINICIUS RANUCCERAMOS 1 \_\_\_\_ Change \_\_\_\_ Add X Remove THOMAS ANTHONY ROUCLOU> CEO \_\_\_\_ Change \_\_\_\_ Add \_\_ Remove CHRISTOPHER B. CAMERON CEO \_\_ Change \_\_ Add \_\_ Remove

#### E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

\_\_\_\_\_

\_\_\_\_\_

N/A

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If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

.

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	OCTOBER 19TH, 2020	
The date of each amendment(s) adoption:		, if other than the

date this document was signed.

Effective date if applicable:

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(no more than 90 days after amendment file date)

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- □ The amendment(s) was/were adopted by the shareholders. The number of votes east 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

•

bv	••	
U.Y		
	(voting group)	

Dated_ <b>[</b>	2/22/2020
Signature	the
	(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)
	GONZAŁO URIBE LEBRIJA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)