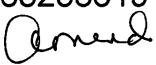
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(Requestor's Name)
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TO: Amendment Section Division of Corporations

Division of Corporations		
NAME OF CORPORATION:	m Petralem sen	vices and.
DOCUMENT NUMBER: P05000		
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Mak Har	Name of Contact Persor	
by Hatron .	Petroleum services	INC.
28 W2 FF	Firm/ Company	
	Address	
	Fl 33130 City/ State and Zip Code	
E-mail address: (to be	used for future annual report	notification)
For further information concerning this matter, pl	ease call:	
mak modern	at ( <b>Zø</b> S	
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	de payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee & Certificate of Status	Security of the second of the	□\$52.50 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 Clifton	Address ment Section n of Corporations Building yearnive Center Circle

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation

FILED. 2014 SEP 29 PM 4: 27 (Name of Corporation as currently filed with the Florida Dept. of State) CONTRACTARY OF STATE (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: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.." or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (Citv) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby 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 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 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		SEAN MARON	4700 SW 67 Ave
Add Remove			unit P-17 Mianul, F1 33155
2) Change			
Add Remove 3) Change			
Add	-		
4) Change			
Add			
5) Change			
Remove			
6) Change			
Add Remove			<del></del>

cob

If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
3601	
<del></del>	
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
\ \	
Effective date if applicable: $9000000000000000000000000000000000000$	
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	
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 a/24/14	
Signature	
(By a director, president of 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)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
(Title of person signing)	_
(Title of person signing)	