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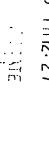
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COVER LETTER

Division of Corporations
NAME OF CORPORATION: RESOLVI INC P111000015464
DOCUMENT NUMBER: TO
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ELSSY GRAUTER. Name of Contact Person
RESOLUI, INC
1122 S. W. 8th St.
Address Mrami-FL. 33130 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
FLSSYGRAUTER at (786) 319-1484 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Aca Code & Daytime Persphone Plantos.
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)

Mailing Address

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TO: Amendment Section

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

Street Address
Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

RESOL VI INC.	<u></u>
(Name of Corporation as currently	filed with the Florida Dept. of State)
P120000 15	464
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "F	lo". A professional corporation name must contain the
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: Name of New Registered Agent (Florida streen	
(Fibrial street)	
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w . Signature of New Re	egistered 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 D	<u>Doc</u>	
X Remove	<u>V</u>	Mike J	<u>Jones</u>	
X Add	<u>sv</u>	Sally S	<u>Smith</u>	·
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change	T	<u>S</u>	Jose J. Gravier	1122 S.W. 8 m St
Add				MIAMI FL 33130.
Remove				<u> </u>
2) Change			<u></u>	
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				· .
5) Change				
Add		_		
Remove				
δ) Change		<u>_</u>		
Add				
Remove				

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The date of each amendment(s) adoption: _	6	<u> </u>	2019	, if other than the
date this document was signed.	_			
Effective date if applicable:	6	.15.	2019	
	(no more than	90 days after an	nendment file date)	
Note: If the date inserted in this block does document's effective date on the Department		icable statutory	filing requirements,	this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)			
The amendment(s) was/were adopted by the by the shareholders was/were sufficient fo		ne number of vot	es cast for the amend	iment(s)
☐ The amendment(s) was/were approved by must be separately provided for each votil	the shareholders the	rough voting gro vote separately	ups. The following son the amendment(s	statement 1):
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