P14000082216

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COVER LETTER

Division of Cor				
NAME OF CORPO	NEWGOTATION	SOLUTIONS INC		
DOCUMENT NUMBER: P14000082216				
The enclosed Article	s of Amendment and fee are su	ubmitted for filing.		
Please return all corr	espondence concerning this ma	atter to the following:		
	Séverine GIANESE-PITTM	AN		
	GIANESE-PITTMAN P.A.	Name of Contact Perso	n	
	100 NORTH BISCAYNE BI	Firm/ Company LVD, SUITE 3070		
	MIAMI, FL 33132	Address		
		City/ State and Zip Cod	de	
sgia	nese@sgpittman.com			
 _	E-mail address: (to be u	sed for future annual repor	t notification)	
For further information	on concerning this matter, pleas	se call:		
Séverine GIANESE	PITTMAN	305 at (722-5986	
Name of Contact Person		Area Co	ode & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Dep	partment 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amen Divisi Clifto	Address dment Section on of Corporations n Building	
Tal	lahassee, FL 32314	2661 1	Executive Center Circle	

Tallahassec, FL 32301

Articles of Amendment to Articles of Incorporation of

NEWGOTATION SOLUTIONS INC.					
(Name of Corporation as currently P14000082216	filed with the Florida Dept. of State)				
(Document Number of	Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Clorida 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 "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the				
B. Enter new principal office address, if applicable:	GIANESE-PITTMAN P.A.				
(Principal office address MUST BE A STREET ADDRESS)	100 NORTH BISCAYNE BLVD, Suite 3070				
	MIAMI, FL 33132				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	GIANESE-PITTMAN P.A.				
Interest and the second	100 NORTH BISCAYNE BLVD, Suite 3070				
	MIAMI, FL 33132				
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:					
Name of New Registered Agent					
(Florida stre	et address)				
New Registered Office Address:	. Florida				
	City) (Zip Code)				
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith 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)

Example:

2

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	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change		<u> </u>	
Add			
Remove			
<i>5</i>) <i>G</i>			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

ttach additional	dding additional Ar sheets, if necessary)	. (Be specific)				
						
					·	
						. <u>-</u>
				<u>-</u> -		
provisions for in	t provides for an exemplementing the ameacable, indicate N/A)	change, reclassif tendment if not	ication, or cance contained in the	llation of issued amendment itsel	<u>shares,</u> <u>f:</u>	
						
					<u> </u>	
···.					· · <u>-</u> .	

The date of each amendment(s) adoption: date this document was signed.	, if other than the
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 with document's effective date on the Department of State's records.	Il not be listed as the
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"	
(voting group)	
☑ 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 Dated 1=) 2015	
(By a dieches pesident 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)	
Jerome SALEM	
(Typed or printed name of person signing)	
President	
(Title of person signing)	