P98000036911

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A RAMSEY

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORI	AVI GROUPING	•	
DOCUMENT NU	P98000036911 IMBER:		
The enclosed Artic	cles of Amendment and fee are su	ibmitted for filing.	
Please return all co	orrespondence concerning this ma	tter to the following:	
	BRYEN BEGLINGER		
	AVI GROUP, INC.	Name of Contact Person	variation program qui a replant comme expelle per para quant reprince program que que la publica de la lacacida de Maria Maria Maria.
	7660-H FAY AVE., SUITE 3	Firm/ Company	
	LA JOLLA, CA 92037	Address	
		City/ State and Zip Code	
В	B@AV1GROUP.COM		
	E-mail address: (to be u	sed for future annual report	notification)
For further inform	ation concerning this matter, plea	se call:	
BRYEN BEGLINGER		619 at (889-0708
Na	me of Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 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 Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

to

AVI GROUP, INC.		Section 1 section 1
(Name of Corpora	ation as currently filed with the Florida I	Dept. of State
P98000036911		4. 10
(Doc	ument Number of Corporation (if known)	SECRETARY OF STATE FALLAHASSEE, FLORIDA
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	ida Statutes, this Florida Profit Corporation	n adopts the following amendment(
A. If amending name, enter the new name of the	corporation:	
	·	The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Col word "chartered," "professional association," or th	rp." "Inc," or "Co". A professional cor	
B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET AL		

C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	3 <u>0X</u>)	
D. If amending the registered agent and/or regist new registered agent and/or the new registere		name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		tions of the position.
Sig	gnature of New Registered Agent, if changi	ing

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.

<u>X</u> Change	<u>PT</u>	John Do	<u>De</u>	
X Remove	<u>V</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		-	***************************************	
Add				
Remove				
2) Change	,	_		
Add				
Remove				
3) Change		_	AL	No.
Add				***************************************
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				AT - 484 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194
6) Change				
Add		*****		
Remove				

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
article II shall be replaced with Annex 1 in entirety which is attached hereto.	
	<u> </u>
	ف به دود به داد دود به
	The state of the s
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)	

Annex 1

to The Articles of Amendment to The Articles of Incorporation of AV1 Group, Inc.

"ARTICLE II CAPITAL STOCK

The aggregate number of shares of Capital Stock which this Corporation shall have authority to issue is Twenty Billion and Five Million (20,005,000,000) Shares consisting of Twenty Billion (20,000,000,000) shares of common stock having a par value of \$.00001 per share and Five Million (5,000,000) shares of preferred stock having a par value of \$.0001 per share, of which One Hundred (100,000) shares are designated Series A preferred stock. The Series A preferred stock which was duly authorized by the Board of Directors as of June 13, 2014, have preferential voting rights of One Hundred Thousand (100,000) per share. Further,

Effective upon the "Effective Date" (as defined below), it is reaffirmed that the outstanding shares of common stock of the Corporation shall be decreased on a basis of twenty thousand (20,000) to One (1) of such shares of common stock held on the Effective Date, without changing the par value of the shares of the Corporation, ("the Reverse Split"); provided that no fractional shares of the Corporation shall be issued in connection with the Reverse Split and the number of shares to be received by a stockholder shall be rounded up to the nearest whole number of shares in the event that such stockholder was otherwise entitled to receive a fractional share as a result of the Reverse Split.

The "Effective Date" shall be the first date permitted or determined by the Financial Industry Regulatory Authority (FINRA) as the effective date of such Reverse Split, subject to the prior filing and recording of this Articles of Amendment in the office of the Florida Department of State Division of Corporations."

	(s) adoption:	, if other than the
date this document was signed		
1000	February 3, 2016	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	,
	•	
	this block does not meet the applicable statutory filing requirements, this does Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment are sufficient for approval.	(s)
	re approved by the shareholders through voting groups. The following statened for each voting group entitled to vote separately on the amendment(s):	nent
	cast for the amendment(s) was/were sufficient for approval	
by	3°	
	(voting group)	
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and sharehold	ler
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Febru	ary 3/20)6	
Dated		
Signature		MATERIAL PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS
/ (B	a director, president or other officer - if directors or officers have not beer	1
Se	ected, by an incorporator - (if in the hands of a receiver, trustee, or other conporated fiduciary by that fiduciary)	ırı
•		
SEE ATTACHED LEGAL	BRYEN BEGLINGER	
NOTARIZATION	(Typed or printed name of person signing)	
•	CHAIRMAN, PRESIDENT AND CEO	
	(Title of person signing)	aginy manages and a classical analysis and a second analysis and a second analysis at the s

CALIFORNIA ALL-PURPOSE ACKNOWLEDG	MENT CIVIL CODE § 1189 STORMAN COMMON COMM
A notary public or other officer completing this certificate document to which this certificate is attached, and not the	ate verifies only the identity of the individual who signed the he truthfulness, accuracy, or validity of that document.
State of California)	
County of San Diego)	
On 9 February 20/6 before me. Ja	son F. Smith, Notary Public
Date	Here Insert Name and Title of the Officer
personally appeared Bayen Beblin	<u>en</u>
On 9 February 20/6 before me, Ja Date personally appeared Bayen Beffing	Name(s) of Signer(s)
subscribed to the within instrument and acknowledge	evidence to be the person(s) whose name(s) is/are ledged to me that he/she/they executed the same in is/her/their signature(s) on the instrument the person(e); ited, executed the instrument.
	i certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
OFFICIAL SEAL	WITNESS my hand and official seal.
MY COMM, EXP. AUG. 15. 2017	Signature of Notary Public
Place Notary Seal Above	
Though this section is optional, completing this	TIONAL Information can deter alteration of the document or form to an unintended document.
Description of Attached Document	,
Title or Type of Document:	Document Date:
Number of Pages: Signer(s) Other Tha	n Named Above;
Capacity(les) Claimed by Signer(s)	Signer's Name:
Signer's Name: ☐ Corporate Officer — Title(s): ☐ Partner — ☐ Limited ☐ General	Signer's Name:
☐ Partner — ☐ Limited ☐ General	☐ Partner — ☐ Limited ☐ General
☐ Individual ☐ Attorney in Fact☐ Trustee ☐ Guardian or Conservator	☐ Individual ☐ Attorney In Fact ☐ Guardian or Conservator
☐ Trustee ☐ Guardian or Conservator	
Other:Signer is Representing:	Other:Signer is Representing: