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(Cit	ty/State/Zip/Phone	; #)
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MAY 12 2015

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	
P13000081280	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following	g:
SASHA SHAMAYEV	
(Name of Conta	ct Person)
FIX-MART INC	
(Firm/ Con	pany)
2500 E HALLANDALE BEACH BLVD., SUITE Y	
(Addre	ss)
HALLANDALE BEACH, FL 33009	
(City/ State and	Zip Code)
E-mail address: (to be used for future annu	al report notification)
For further information concerning this matter, please call:	
	at
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Flo	rida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Certificate of Status	y Certificate of Status

Mailing Address

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	E LOD
		15 May
(Name of Corporation as	currently filed with the Florida De	pt. of State)
(Documen	t Number of Corporation (if known)	The same of the contract of th
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not For Profit	t Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:	
FIX-MART INC		The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation" or "incorporated" or th	
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADL</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
D. If amending the registered agent and/or register new registered agent and/or the new registered		the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida str	reet address)
ivew negistered Office Address.		
<u></u>	(Cir.)	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	tistered Agent: I am familiar with and accept the ob-	ligations of the position.
	Signature of New Registered A	gent, 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 X Remove X Add	<u>V</u> <u>Mik</u>	n <u>Doe</u> e <u>Jones</u> y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	ILLIA MELNYK	2500 E HALLANDALE BEACH B
XAdd			STE Y
Remove			HALLANDALE BEACH, FL 3300
2) Change	VP	ULYANA SHAMAYEVA	2500 E HALLANDALE BEACH B
Add			STE Y
X Remove			HALLANDALE BEACH, FL 3300
3) Change			<u> </u>
Add			-
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)					
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	e date of each amer this document was	signed.
Effe	ective date <u>if appli</u>	cable: (no more than 90 days after amendment file date)
		ed in this block does not meet the applicable statutory filing requirements, this date will not be listed as the tee on the Department of State's records.
Ado	option of Amendm	ent(s) (<u>CHECK ONE</u>)
	The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) at for approval.
	There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
	Dated	April 28, 2015
	Signature	
		(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
		SASHA SHAMAYEV
		(Typed or printed name of person signing)
		President
		(Title of person signing)