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(Re	equestor's Name)	
(Ad	ddress)	
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(Ci	ty/State/Zip/Phone #)
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(Do	ocument Number)	
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Arond,

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: AXIS Bridge, Inc
DOCUMENT NUMBER: N 130 0000 3825
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Myles 8: Schlan, President (Name of Contact Person)
Axis Rollar
35945-Ocean Blvd (un+ 607)
Highland Beach, FL-33487
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Myles B Schlam at (954), 804-6868
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

,	Articles	of Amendment			
	Articles o	to of Incorporation			
(Name of Corporation as currently filed wi) de	- Inc.			
(Document Nu	000 mber of Coη	ooration (if known)			
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statutes,	this Florida Not For	Profit Corporation	on adopts the follo	owing
A. If amending name, enter the new name of the	e corporatio	<u>"</u>		The	e new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		on" or "incorporated	" or the abbreviat	ion "Corp." or ".	lnc."
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A.		N/A			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	 <u>BOX</u>)	N/A			
D. If amending the registered agent and/or registered agent and/or the new registered			enter the name o	f the ===	
Name of New Registered Agent:	N_{ℓ}	77		OCT 23	三
New Registered Office Address:	NA	lorida street address)	, Florida		ED
	(City)	. /.		(Zip Code)	_
New Registered Agent's Signature, if changing R	Registered A	gent: N/A			
I hereby accept the appointment as registered agen	t. I am fami	liar with and accept i	the obligations of	the position.	
Cianata	ra of Nov. B	egistered Agent, if che	anaina		
Signatu	a e oj new Ka	egistereu algent, if cat	4/1 火 (// 火		

Page 1 of 4

address of each Officer (Attach additional sheets, Please note the officer/di P = President; V = Vice I	and/or Director t , if necessary) rector title by the j President; T= Trec = Chief Financial	first letter of the office title: asurer; S= Secretary; D= Director; TR= Trus Officer. If an officer/director holds more than	tee; C = Chairman or Clerk; CEO = Chief
	ves the corporation	nanner. Currently John Doe is listed as the P. on, Sally Smith is named the V and S. These sh SV as an Add.	
Example: X Change X Remove X Add	PT John D V Mike Jo SV Sally S	ones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove			
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

The date of each amendment(date this document was signed.		_, if other than the
Effective date if applicable:	10/16/2014	
The same of the sa	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
, <u></u>	(voting group)	
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated	10/16/2014	
Signature	(lapor Rain)	
Bignature	y the chairman or vice chairman of the board, president or other officer-if directors	
ha	ave not been selected, by an incorporator - if in the hands of a receiver, trustee, or	
ot	her court appointed fiduciary by that fiduciary)	
EL A	LAOUI LAMRANI, ADAM A, SR	
 -	(Typed or printed name of person signing)	
PRE	SIDENT	
	(Title of person signing)	·

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 10/20/14	
(no moke than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Dated 10/20/14/16	
Signature	thairman
(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)	
the court appointed indiciary by that indiciary)	
- Mes B. Schlam Chairma	M
(Typed or printed name of person signing)	
Chairman /Pres-	
(Title of person signing)	