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DECRETARY OF STATE
TALLAHASSEE, FLORID

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COVER LETTER

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TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	E	ano	F	SOLVIO	<i>۳</i> .১	INC.
DOCUMENT NUMBER:	P040	000	/328	379		<u> </u>
The enclosed Articles of Amendmen	t and fee a	are submi	itted for	filing.		
Please return all correspondence con	cerning th	is matter	to the fo	Howing:		
<i>F</i> R	<u>CO</u> (Name	R/A of Contact	Person)	<u> </u>	<u>-</u> :	 .
	(Fi	irm/ Comp	any)	<u>, , , , , , , , , , , , , , , , , , , </u>		
	N.	(Address)	<i>F</i> ,	IVE		<u> </u>
Houx	√∞9, (City/ S	FC State/ and 2	ip Code)	3024	 	<u> </u>
For further information concerning the	his matter,	, please c	all:			
FRED BL (Name of Contact Person) Enclosed is a check for the following		at	(<u>95)</u> (Area	Code & Daytime	3-87 Telepho	ne Number)
\$35 Filing Fee \$43.75 Filing Certificate of	Fee & Status	. (43.75 File Certified C (Additiona enclosed)	l copy is	(552.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporation P.O. Box 6327	ons	-	Ame Divi	et Address endment Sectionsion of Corpo E. Gaines Stre	rations	

Tallahassee, FL 32399

	Art	icles of Amendment		
		to		Av e
	Arti	cles of Incorporation		
		of		AFR. ES
\mathcal{E}	4 F	SociHONS	INC.	A\$8
(Name of	corporation as	currently filed with the Flori	da Dept, of State)	PH 12: E. FLO
	0 1		_	SI SI
	1040	000/3287	9	ORITE ORITE
	(Document r	number of corporation (if kn	own)	>
Pursuant to the provisions of adopts the following amendm		•	-	Corporation
NEW CORPORATE NAM	E (if changing	g):	and the second s	
		<u> </u>		
(Must contain the word "corporatio	n," "company,"	or "incorporated" or the abb	reviation "Corp.," "In	ic.," or "Co.")
(A professional corporation must co	ontain the word	"chartered", "professional as	sociation," or the abi	oreviation "P.A.")
AMENDMENTS ADOPTE	D- (OTHER	THAN NAME CHAN	GE) Indicate Art	icle Number(s)
and/or Article Title(s) being a				
Do Louis		,		
ARTICLE V	<u></u>	<u> </u>		<u> </u>
1 0		/ _		·
TO KETOVE	THE NA	ng of Caro	, DOLLE	<u> </u>
DIRECTOR C	1110	Correary.		
DIRECTOR C	110	CQ/RAP		
		<u>-</u>		
				·
<u></u>		<u> ,</u>	-· · -	
		<u> </u>		
		4		
	(Attach	additional pages if necessary	y)	³
	Ç		, ,	
If an amendment provides for implementing the amendr	r exchange, re nent if not co	eclassification, or cancel ntained in the amendme	llation of issued s ent itself: (if not app	hares, provisions blicable, indicate N/A)
	<u> </u>			
	<u> </u>	<u></u>		<u> </u>
	·			

(continued)

The date of each amendment(s) adoption:
Effective date if applicable: (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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.
Signed this 8 day of December. 2014.
Signature (By a director, president 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) (Typed or printed name of person signing)
(Title of person signing)

FILING FEE: \$35

CK#111 78