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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: Automaticity,	Inc.			
DOCUMENT NUMI	BER: <u>P08000071697</u>				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Janet Vasquez				
	Name of Contact Person				
	Automaticity, Inc.				
		Firm/ Company	······································		
	12485 SW 137th Ave., Suite 301				
	Address				
	Miami, FL 33186				
		City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·		
For further information	E-mail address: (to be used)	sed for future annual report	notification)		
Janet Vasquez		at ( 954	) 822-2876		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment of State:		
S35 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			Address		
Amendment Section		Amendment Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327		Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

16 JUN -6 AH 10: 14

Automaticity, Inc.	機能はは「日本」という。 これでは 事態性に大幅をするこれが、中心であった。
(Name of Corpora	tion as currently filed with the Florida Dept. of State)
P08000071697	
(Docu	ument Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Flori ts Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment(
. If amending name, enter the new name of the	corporation:
	The new
"Corp.," "Inc.," or Co.," or the designation "Corword "chartered," "professional association," or th	
B. Enter new principal office address, if applicab (Principal office address <u>MUST BE A STREET AL</u>	DDRESS )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>ox</u> )
D. If amending the registered agent and/or regist new registered agent and/or the new registere	ered office address in Florida, enter the name of the d office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Re hereby accept the appointment as registered agent.	egistered Agent:  I am familiar with and accept the obligations of the position.
,	, , , , , , , , , , , , , , , , , ,
Sig	nature 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)

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	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Saily Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
l) Change	Р	Adam Ventura	12485 SW 137th Ave.	
X Add			Suite 301	
Remove			Miami, FL 33186	
2) X Change	VP	janet Vasquez		
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
**************************************	
The state of the s	
If an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis and analysis and an analysis analysis and an analysis and an analysis analysis and an analysis

The date of each amendment(s) adop date this document was signed.	ition:	, if other than the
Effective date if applicable:		
епесиче вые <u>и яррисыре</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depart	ck does not meet the applicable statutory filing requirements, the true of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopte by the shareholders was/were suffic	ed by the shareholders. The number of votes cast for the amendacient for approval.	nent(s)
	ved by the shareholders through voting groups. The following stack 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 adopte action was not required.	ed by the board of directors without shareholder action and share	sholder
☐ The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and sharehold	er
Dated5[19]16		
s: A	2	
selected, b	ctor, president or other officer – if directors or officers have not by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	
	Tonst Vasquez (Typed or printed name of person signing)	
	President	
	(Title of person signing)	