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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: AXION SEVEN R	NC	-, <u>-</u> -			
DOCUMENT NUME	BER: P10000096697					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	ROBERTO CHAMORRO					
	Name of Contact Person					
	AXION SEVEN INC					
		Firm/ Company				
	1917 SW 177TH AVE					
	Address					
	HOLLYWOOD FL 33029					
		City/ State and Zip Code	C			
robert	o@axionseven.com					
	·	sed for future annual report	notification)			
For further information	n concerning this matter, pleas		、326- 2 191			
Name (of Contact Person	at (de & Daytime Telenhone Number			
ROBERTO CHAMORRO at (786) 326-2191 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	□\$43.75 Filing Fec & 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 P.O. Box 6327		Division of Corporations Clifton Building				
Tallahassee, FL 32314		2661 Executive Center Circle				
,		Tullahassee, FL 32301				

Articles of Amendment Articles of Incorporation of

AXION SEVEN INC

(Name)	of Corporation as currentl	y filed with the Florida Dept. of State)
910000096697		
	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:	
		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	iation "Corp," "Inc," or "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the P.A."
B. Enter new principal office address, if applicable:		1917 SW 1771H AVE
(Principal office address MUST BE A S		HOLLYWOOD FL 33029
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1917 SW 177TH AVE
		HOLLYWOOD FL 33029
If amending the registered agent an new registered agent and/or the ne		
Name of New Registered Agent	ROBERTO CHAMORRO	
	1917 SW 177TH AVE	
	(Florida str	eet addrexs)
. <u>New Registered Office Address:</u>	HOLLYWOOD	, Florida 33029
		(City) (Zip Code)
New Registered Agent's Signature, if o	hanging Projetored Agent	
I hereby accept the appointment as regis	tered agent. I am familigr	: with and accept the obligations of the position.

Signature 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.

Example: X Change	<u>PT</u>	John D	<u>0¢</u>		
X Remove	$\underline{\mathbf{V}}$	Mike J	ones .		
<u>X</u> Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>		Name	Address	
1) Change	Λħ	_	CLAUDIA A REATEGUI	5440 NW 161ST ST	
Add				MIAMI GARDENS FL 33014	
X Remove					
2) Change		_			
Add					
Remove					
3)Change		_	,		
Add					
Remove					
4) Change					
, Add					
Remove					
5) Change		<u>.</u>			
Add	•				
Remove					
6) Change					
Add					
Damoua					

	rticles, enter change(s) here: y). (Be specific)
•	
· · · · · · · · · · · · · · · · · · ·	

<u>If an amendment provides for an ex</u>	xchange, reclassification, or cancellation of issued shares,
	mendment if not contained in the amendment itself:
	1
(if not applicable, indicate N/A)	,
(if not applicable, indicate N/A)	,
(if not applicable, indicate N/A)	,
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	,
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	,
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

	07/06/2017	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
	06/2017	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date we repartment of State's records.	iil not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were apmust be separately provided for	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
	t for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
	lopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
07/06/201 Dated	7	
<		
selec	director, president or other officer – if directors or officers have not been led, by an incorporator – if to the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	ROBERTO CHAMORRO	
	(Typed or printed name of person signing))
	PRESIDENT	
	(Title of person signing)	