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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: VIZIG CORPORA	NOIT			
DOCUMENT NUMI	P10000101208				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	MARIANA BLAJ				
	Name of Contact Person				
		Firm/ Company			
	4125 ARAJO CT				
	BELLE ISLE FL 32812	Address			
		City/ State and Zip Cod	e		
mirel	a1771@yahoo.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
MARIANA BLAJ		at (279-7736		
Name of Contact Person Area Code & Daytime Telephone N		de & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	irtment 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Cliftor	Address Iment Section on of Corporations (Building ixecutive Center Circle		

Tallahassee, Fl. 32301

Articles of Amendment

to

Articles of Incorporation

 \mathbf{of}

VIZIG CORPORATION	
(Name of Corporation as current	ly filed with the Florida Dept, of State)
P10000101208	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	7t
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	FILED SECRE ARE OF
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	lress in Florida, enter the name of the
Name of New Registered Agent	
(Florida st	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
Signature of New 1	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 Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	IOAN BLAJ	4125 ARAJO CT
X Add			BELLE ISLE FL 32812
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			·····
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
ARTICLE VII: Adding Title: D - Ioan Błaj. 4125 Arajo Ct. Belle Isle, FL. 32812					
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,					
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)					

05/21/2018	
The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date w document's effective date on the Department of State's records.	rill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted 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.	
Dated 05 21 20 8	
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)	
MARIANA BLAJ	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)