P/1000073268

(Re	questor's Name)	
(Ad	dress)	<u> </u>
(Ad	dress)	
(Cit	y/State/Zip/Phone a	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	





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FEB 2 8 2013 T. RODLARTS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	NULIFE	INDUSTRIE	s, INC.		
DOCUMENT NUMBER:	MBER:				
The enclosed Articles of Amendi	ment and fee are subn	nitted for filing.			
Please return all correspondence	concerning this matte	r to the following:			
	SHEL	BY MATHEU Name of Contact Person			
		NULIFE			
Firm/Company 1620 W. Cakland Park Blud #202 Address					
Fort Lauderdale, FC 33311 City/ State and Zip Code					
E-ma	Smath il address: (to be used	ewOnulifes I for future annual report	notification)		
For further information concerning	ng this matter, please	call:			
Shelby 1 Name of Contact	Mathew Person	at (<u>954</u> Area Co			
Enclosed is a check for the follow					
	3.75 Filing Fee & tificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Addr	<u>ess</u>	Street	Address		

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation

FILED

MILITEE TAIDINSTPTIES TRANSPORT	
(Name of Corporation as currently filed with the Florida Dept. of State) Corporation	
P11000073268 TALLAHASSIT FLORINA	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s tits Articles of Incorporation:) to
A. If amending name, enter the new name of the corporation:	
GENX INNOVATIONS, INC. The new	
name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp.," "Inc." or Co" or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the word "chartered." "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	
Name of New Registered Agent Agent Name of New Registered Name o	
(Florida street address)	
New Registered Office Address: (City), Florida (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar 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

Suke Jones, v as Remo	ve, ana Sauy Sm	nn, Sv. as an Add			
Example: XChange	<u>PT</u> <u>John</u>	n <u>Doe</u>			
X Remove	<u>V</u> <u>Mik</u>	<u>e Jones</u>			
<u>X</u> Add	<u>SV</u> <u>Sall</u>	y Smith			
Type of Action (Check One)	Title	<u>Name</u>			Address
1) Change		BINDU	ADAI 1	MATHEW	1620 W. Oakland PK Blue
X Add					Suite 202
Remove					Dakland PK, FL 33311
2) Change					
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change				·····	
Add				-	
Remove					70.
δ)Change	<u></u>				
Add				-	
Remove					

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If an amendment provides for	u an avahanga	roolassificatio	n ar cancellatio	n of icenad charge	
ti an amendment provides to	the amendmen	it if not contai	ned in the amen	dment itself:	
provisions for implementing	e N/A)				
provisions for implementing (if not applicable, indicate					
if not applicable, indicate	,				
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provisions for implementing (if not applicable, indicate					
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provisions for implementing (if not applicable, indicate)					

The date of each amendment(s) ac	doption: $\frac{2/20/2013}{}$
Effective date <u>if applicable</u> :	2/20/2013
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.
	proved by the shareholders through voting groups. The following statement 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)
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated	120/2013
Signature	Julber Most
(By a d	irector, president or other officer – if directors or officers have not been
	d, by an incorporator — if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
аррош	SHELBY MATHEW
	(Typed or printed name of person signing)
	President
	(Title of person signing)