P11000078359

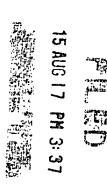
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COVER LETTER

TO: Amendment Sect Division of Corp			
NAME OF CORPOR	RATION: PXP Solutions, Inc	c.	
DOCUMENT NUMI	BER:		· · · · · · · · · · · · · · · · · · ·
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Michael E. Steuer		
		Name of Contact Person	1
	Steuer & Co., Inc.		
		Firm/ Company	
	1000 S. Belcher Rd. Suite 7		
	······································	Address	
	Largo, FL 33771		
		City/ State and Zip Cod	E
mike	@mikethecps.com		
	•	sed for future annual report	notification)
	D-filati addicas: (to be a	300 tot total a allitaat topor	
For further informatio	n concerning this matter, plea	se call:	
Michael E. Steuer		aı (797-9000
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment 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		Ameno Divisio Cliftor 2661 E	Building Executive Center Circle
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

PXP Solutions, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P11000078359 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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 malling address, if applicable:
(Malling address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florids, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street addréss) Florida New Registered Office Address: 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

Altach additional sheets Please note the officer/di P = President; V= Vice Executive Officer, CFO held. President, Treasure Changes should be noted a change, Mike Jones let Mike Jones, V as Remove	anglor L if neces. rector till Presiden = Chief i ir, Direct in the fo wes the c	nrector b sary) le by the f t; T= Tre Financial or would llowing n corporatio	ieing added: first letter of the office title: asurer: S= Secretary; D= Director: TR= T Officer. If an officer/director holds more to be PTD. nanner. Currently John Doe is listed as the on, Sally Smith is named the V and S. These	director being removed and title, name, and rustee; C = Chairman or Clerk; CEO = Chief than one title, list the first latter of each office PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change,	
Example: XChange	PT	John Do	<u>oe</u>		
X Remove	Ÿ	Mike Jo	Mike Jones		
_X Add	<u>sv</u>	Sally Sr	Sally Smith		
Type of Action (Check One)	Title		Name	Address	
1) Change	D	_	Edward Chandler	Moor Lodge, Moor Lane Stathem	
Add				Melton	
X Remove				Mowbray LE14 3NB, UK, AL	
2)Change		_		· · · · · · · · · · · · · · · · · · ·	
Add					
Remove					
3) Change	·	_		· · · · · · · · · · · · · · · · · · ·	
Add					
Rеточе					
4) Change		_			
Add					
Remove					
5) Change		_			
A d d					
Remove					
6) Change		_			
Add					

Remove

E. If amend (Attach a	ding or adding additional Art	icles, enter change(s) (Be specific)	here:		
····		····-			
		······································		<u></u>	
					
					
F. <u>If an am</u> <u>provisi</u> (<i>If i</i>	tendment provides for an exc ons for implementing the am not applicable, indicate N/A)	hange, reclassification endment if not contain	, or cancellation of ed in the amendme	issued shares, int itself:	
<u> </u>				· · · · · · · · · · · · · · · · · · ·	
		,			
- 					

The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date if applicable:	
(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 wi document's effective date on the Department of State's records.	Il 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 10th AUGUST 2015	
Asti line	
(By a director, president or other officer is 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)	
JULIAN LZIGH	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	