P120000102048

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SECRETARY OF SOME DIVISION OF CORPOLATION

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COVER LETTER -

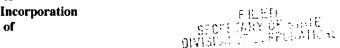
TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Xystun	Solutions.	Inc.
DOCUMENT NUMB	er: <u>P1200010</u>	2048	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this mat	tter to the following:	
-	William	Name of Contact Person	S
-	<u>Xyston</u> S	Solutions, Inc. Firm/Company	•
-	P.O. Box		·····
-	Navarre		<u>ldo</u>
	Jill @Xystonso E-mail address: (to be us	ed for future annual report	
For further information	concerning this matter, pleas	se call:	
William	Safos	at (<u>85</u> b	865-7920
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$35 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)
	ing Address indment Section		Address Iment Section

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

of



Xyston Solutions, Inc.
(Name of Corporation as currently filed with the Florida Dept. of Rate 8 2 71 3:57
P12600102048
(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 its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
· · 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 new registered agent and/or the new registered 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 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.

Example:			
X_Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	<i>,</i>
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change		-	
Add			/
Remove			
2) Change			
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).		,
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	1 100 11 11 11 10	
provisions for implementing the ame	ange, reclassification, or cancellation of issued ndment if not contained in the amendment itse	
(if not applicable, indicate N/A) Reclassification of	ices, and Shapes	
10 million total		
TO TORCOTOR TO TOR	5.4	
William Satos s	hares = 2,550,000	
	shares = 1,225,000	
Craig Walker s		
Unissued Shares =		

The date of each amendment(s) adoption: 09 Feb 2016 date this document was signed.	, if other than the
Effective date if applicable: 09 Fe b 2016 (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)	16 F
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	16 FEB 12
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	Si Si
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)	——————————————————————————————————————
William J. Safos (Typed or printed name of person signing)	
Director, Operations and Business S. (Title of person signing)	slutions