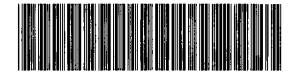
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: N+ A Ventures Company

DOCUMENT NUMBER: P13000030870 The enclosed Articles of Amendment and fee are submitted for filing Please return all correspondence concerning this matter to the following: Firm/Company

8033 Biscayne Blvd.

Address

Miami, FL 33138

City/State and Zip Code ossfitlivefree@gmail-com -mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786) 866 6125

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 Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Of Carry

N -	+ A Ventures Company
(Name of C	Corporation as currently filed with the Florida Dept. of State
	P13000030870
	(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	6, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name	of the corporation:
	The new
"Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	the word "corporation," "company," or "incorporated" or the abbreviation on "Corp," "Inc," or "Co". A professional corporation name must contain the a," or the abbreviation "P.A."
B. <u>Enter new principal office address, if a</u> (Principal office address <u>MUST BE A STRE</u>	
C. Enter new mailing address, if applicab (Mailing address <u>MAY BE A POST OF</u>)	
D. If amending the registered agent and/o new registered agent and/or the new re	r registered office address in Florida, enter the name of the egistered office address:
Name of New Registered Agent	Ben Azadi
	8033 Biscayne Blvd- (Florida street address)
New Registered Office Address:	Miami, Florida FL 33138 (City), Florida (Zip Code)
New Registered Agent's Signature, if chan I hereby accept the appointment as registered	ging Registered Agent: d agent. I am familiar with and accept the obligations of the position.
***************************************	Ben Ugudi 5 3
	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 Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes .	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	Title		Name	Address
1) Change	CEC	2	Nicholas Christi	o 77 NW 99th St Miami Shores, FL 3315
Add . Remove			,	Miami Shores, FL 3315
2) Change Add	CE	<u>0</u>	Ben Azadi	1020 NE 85th St. Migmi, FL. 33138
Remove				
3) Change Add		-		
Remove				
4) Change Add		-		
Remove				
5) Change Add		-		
Remove				
6) Change Add		-		
Remove				

f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)
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f an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than th
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, document's effective date on the Department of State's records.	, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amen by the shareholders was/were sufficient for approval.	dment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
by" (voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	areholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	older
Dated8/19/16	
Signature Ben Anulé	
(By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
Ben Azadi	
(Typed or printed name of person signing)	
Owner	
(Title of person signing)	