P14000005769

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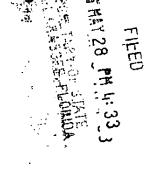
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COVER LETTER

TO: Amendment Section *

Division of Corporations G4 Genious Business Corp P14000005769 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Guedez, Gustavo Firm/ Company 400 Countyline Ct., Unit 13 Oakland, Florida 34787
City/ State and Zip Code aquedez. atmatpx@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Guedez, Gustavo Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 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 enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment

to

•	Article	s of Incorporation	FILEO
G4	Genious	Business	COMPRISE MAY 28 PM 4: 33
(Name of	Corporation as c	urrently filed with th	e Florida Dept. of State) TOF STATE.
P	1400000	5769	e Florida Dept. of State), THOF STATE
	(Document Nu	mber of Corporation (if known)
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statut	es, this <i>Florida Profit</i>	Corporation adopts the following amendment(s
A. If amending name, enter the new name	ne of the corporat	<u>ion:</u>	
Pixolo	gy Inc		The new
name must be distinguishable and conto	in the word "cor tion "Corp," "Inc	poration," "company ," or "Co". A profe	," or "incorporated" or the abbreviation ssional corporation name must contain the
B. Enter new principal office address, is (Principal office address MUST BE A ST			
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		N/A	
D. If amending the registered agent and new registered agent and/or the new Name of New Registered Agent			n, enter the name of the
	(FI	orida street address)	
Now Projectored Office Address	N/A		Florida
New Registered Office Address:	 :	(City)	(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe			ot the obligations of the position.
<u> </u>		of New Registered Age	nt, 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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	Stephania Martinez	400 Countyline Ct.
X_ Add			Unit 13
Remove			Oakland, Florida 34787
2) Change		Linda Fernandez	400 Countyline Ct.
X_Add			Unit 13
Remove		C 1 C - 1	Oakland, Florida 34787
3) Change	CEO	Sandra Sergent	400 Countyline Ct.
X Add			Unit 13
Remove			Oakland, Florida 34787
4) X Change	T	Gustavo Guedez	400 Countyline Ct.
Add			Unit 13
Remove			Oakland, Florida 3478
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	icles, enter change(s) here: (Be specific)
N/A	
	
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If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

The date of each amendment(s) adoption:date this document was signed.	, if other than the
,	
Effective date <u>if applicable</u> : (no more than 90 day.	s after amendment file date)
Note: If the date inserted in this block does not meet the applicable adocument's effective date on the Department of State's records.	statutory filing requirements, 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 by the shareholders was/were sufficient for approval.	ber of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through we must be separately provided for each voting group entitled to vote s	
"The number of votes cast for the amendment(s) was/were suff	ficient for approval
by(voting group)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
The amendment(s) was/were adopted by the board of directors with action was not required.	at a second of the second of t
The amendment(s) was/were adopted by the incorporators without s action was not required.	hareholder action and shareholder
Dated 05/22/2015 Signature	_
(By a director, president or other officer – selected, by an incorporator – if in the han appointed fiduciary by that fiduciary)	
Gustavo (Typed or printed name	
Directo	
(Title of pe	rson signing)