**Division of Corporations** 

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: EXPRESS ACCOUNTING AND INCOME TAX SVCS CORP.

Account Number : I20060000141 Phone

: (561)929-6899

Fax Number

: (954)788-7400

\*\*Enter the email address for this business entity to be dsed for future annual report mailings. Enter only one email address please.\*\*

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN

LIVEON GROUP, CORP

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 01      |
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Corporate Filing Menu

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53.

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION: LIVEON  | GROUP CORP   |             |  |  |
|--|--|-------------|--|--|
| DOCUMENT NUMBER: P1400005  | 5573   |             |  |  |
| The enclosed Articles of Amendment and fee are   |  |             |  |  |
| Please return all correspondence concerning this   |  |             |  |  |
|  |  |             |  |  |
| ANIBAL QUI   | Name of Contact Person   |             |  |  |
| EXPRESS A  | CCOUNTING CORP   |             |  |  |
| 3927 N. FED  |  |             |  |  |
| POMPANO E  | BEACH, FL 33064  |             |  |  |
| -  | City/ State and Zip Code   |             |  |  |
| ANIBALQUINTAO@HOTMAIL.COM  |  |             |  |  |
| E-mail address: (to b  | e used for future annual report notification)  |             |  |  |
| For further information concerning this matter, p  | lease call:  |             |  |  |
| ANIBAL QUINTAO   | <sub>at (</sub> 561 <sub>)</sub> 929-689   | 9           |  |  |
| Name of Contact Person   | Area Code & Daytime Teler  | hone Number |  |  |
| Enclosed is a check for the following amount ma  | de payable to the Florida Department of State:   |             |  |  |
| ■ \$35 Filing Fee Certificate of Statu   |  | tatus       |  |  |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301 | cie         |  |  |

## Articles of Amendment to Articles of Incorporation of

| LIVEON GROUP GO   | N.F.  |                    |                      |
|---|---|--------------------|----------------------|
|   | filed with the Florida Dept. of State)                    |                    |                      |
| P14000055573  |   |                    |                      |
| (Docun  | nen Number of Corporation (if known)                      |                    |                      |
| Pursuant to the provisions of section 617.10 amendment(s) to its Articles of Incorporatio | 106, Florida Statutes, this Florida Not For Profit Corpor | ation adopts the ( | following            |
| A. If amending name, enter the new nam  | ne of the corporation:                                    |                    |                      |
| name must be distinguishable and contain to   | he word "corporation" or "incorporated" or the abbrev     | ration "Corp." o   | The new              |
| "Company" or "Co." may not be used in the   |   | Corp. 0            | 7.700                |
| B. <u>Enter new principal office address, if a (Principal office address)</u>             | applicable:   |                    |                      |
| 2 rocepus office and cas <u>pages para of a</u>   |   |                    |                      |
|   |   |                    |                      |
|   |   | <del> </del>       |                      |
| C. Enter new mailing address, if applica  |   |                    |                      |
| (Mailing address MAY BE A POST OF   | TICE BOX)   |                    |                      |
|   |   |                    |                      |
|   |   |                    |                      |
|   | <del></del>   |                    |                      |
|   | or registered office address in Florida, enter the nam    | of the             | <b>5</b>             |
| new registered agent and/or the new r   |   |                    | 7                    |
| Name of New Registered Agent:   | GUILHERME O. BARBOSA                                      |                    | ¥                    |
| (   | 3927 N FEDERAL HWY  |                    | TALLAHASSEE, FLORIDA |
| Non Paristand Office Address  | (Florida sireet address)                                  |                    | 7.5                  |
| <u>New Registered Office Address:</u>   |   | 32064              | · ·                  |
| <u>.</u>  | POMPANO BEACH , Florida                                   | 3064               | 5                    |
|   | (City)  | (Zip Code)         | 25                   |
| New Registered Agent's Signature, if char   | nging Registered Agent:                                   |                    | 3                    |
| hereby accept the appointment as register   | Tuggns. I gen fum than with and good pot the obligations  | of the position.   |                      |
| ₹ <b>7</b> *  | Signature of New Registered Agent, I changing             |                    |                      |
|   | 1   | 1                  |                      |

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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HIHOOZE 82305
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:                      | ove, una ba | ,           | ,,                  |                        |
|-------------------------------|-------------|-------------|---------------------|------------------------|
| X Change                      | <u>PT</u>   | John Doe    |                     |                        |
| X Remove                      | Y           | Mike Jones  |                     |                        |
| X Add                         | <u>sv</u>   | Sally Smith |                     |                        |
| Type of Action<br>(Check One) | Title       | Na          | me                  | <u>Addres</u> s        |
| 1) Change                     | Р           | Al          | NIBAL QUINTAO       | 3927 N FEDERAL HWY     |
| Add Add                       |             |             |                     | POMPANBO BEACH, FL     |
| Remove                        |             |             |                     | 33064                  |
| 2) Change                     | Р           | G           | UILHERME O. BARBOSA | RUA MARAJO 77          |
| Add                           |             |             |                     | ED. COSTA ATLANTICA 14 |
| Remove                        |             |             |                     | PRAIA DA COSTA, ES     |
| 3) Change                     |             |             |                     | 29101-250              |
| Add                           |             |             |                     |                        |
| Remove                        |             |             |                     |                        |
| 4) Change                     |             | _           |                     |                        |
| Add                           |             |             | ,                   |                        |
| Remove                        |             |             |                     |                        |
| 5) Change                     | <del></del> |             |                     |                        |
| Add                           |             |             |                     |                        |
| Remove                        |             |             |                     |                        |
| 6) Change                     |             |             |                     |                        |
| Add                           |             |             |                     |                        |
| Remove                        |             |             |                     |                        |

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| ach additional sheets, if necessary).   | (Be specific)   |            |
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| amendment provides for an exc   | change, reclassification, or cancellation of issued share   | <u>5.</u>  |
| visions for implementing the am   | change, reclassification, or cancellation of issued share<br>tendment if not contained in the amendment itself; | <u>\$.</u> |
| amendment provides for an exc<br>visions for implementing the am<br>(if not applicable, indicate N/A) | change, reclassification, or cancellation of issued share lendment if not contained in the amendment itself:    | <u>\$</u>  |
| visions for implementing the am   | change, reclassification, or cancellation of issued share tendment if not contained in the amendment itself;    | <u>\$.</u> |
| visions for implementing the am   | change, reclassification, or cancellation of issued share tendment if not contained in the amendment itself;    | <u>s.</u>  |
| visions for implementing the am   | change, reclassification, or cancellation of issued share tendment if not contained in the amendment itself:    |            |
| visions for implementing the am   | change, reclassification, or cancellation of issued share endment if not contained in the amendment itself:     | 3,         |
| visions for implementing the am   | change, reclassification, or cancellation of issued share endment if not contained in the amendment itself:     | <b>5.</b>  |
| visions for implementing the am   | change, reclassification, or cancellation of issued share tendment if not contained in the amendment itself:    | 5.1        |
| visions for implementing the am   | change, reclassification, or cancellation of issued share endment if not contained in the amendment itself:     | 5.         |
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| visions for implementing the am   | change, reclassification, or cancellation of issued share endment if not contained in the amendment itself:     | <u>S.</u>  |

## H140002282303

the

| The date of each amendment(s) adoption:   | 30/2014  | , if other than        |
|---|--|------------------------|
| Effective date if applicable: 08/30/2014  |  |                        |
| Fliecuve date il abbittanté:  | (no more than 90 days after amendment file date  |                        |
| Adoption of Amendment(s) (CF  | IECK ONE)  |                        |
| The amendment(s) was/were adopted by the by the shareholders was/were sufficient for  | shareholders. The number of votes cast for the arpproval.  | endment(s)             |
| The amendment(s) was/were approved by the must be separately provided for each voting | e shareholders through voting groups. The follow<br>g group entitled to vote separately on the amendme                                   | ng statement<br>nt(s): |
| "The number of votes cast for the ame   | ndment(s) was/were sufficient for approval   |                        |
| by  | ting group)  |                        |
|   | board of directors without shareholder action and  | shareholder            |
|   | incorporators without shareholder action and share   | cholder                |
| Dated 09/28/2014  | A  |                        |
| Signature   | White  |                        |
| selected, by an ind   | ident or other officer — if directors or officers have<br>orporator — if in the hands of a receiver, trustee, or<br>y by that fiduciary) |                        |
|   | ANIBAL QUINTAO   |                        |
|   | (Typed or printed name of person signing)  |                        |
| ·   | PRESIDENT  |                        |
|   | (Title of person signing)  |                        |
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