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COVER LETTER ...

TO: Amendment Section

Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

ME OF CORPORATION: A.W.E. Solutions, Inc.					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Alexandra Hernandez Name of Contact Person					
4928 Headland Hills Ave.					
Tampa, FL 33625 City/ State and Zip Code	•				
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Alexandra Hernandezai (305) 801-6525 Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee					
Mailing Address Amendment Section Amendment Section					

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment to Articles of Incorporation

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<u> 1.W.C. Soluti</u>	$0\eta S_{i} \ln C_{i}$
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P14.0000	161975
(Document Number	of Corporation (if known)
(Bisament tamos)	or corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, the its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
A LILE O DOCOL	nting Solutions, Inc. The new
name must be distinguishable and contain the word "corporate	The new
"Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or	ion, compuny, or incorporated or the appreviation "Co". A professional corporation name must contain the
word "chartered," "professional association," or the abbreviation	1 "P.A."
D. Passa and advisor of the control of	= = = = = = = = = = = = = = = = = = =
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
,	
	P CO
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
D. If amending the registered agent and/or registered office ad	dress in Florida, enter the name of the
new registered agent and/or the new registered office addre	
Name of Nov. Businessed towns	
Name of New Registered Agent	
(Florida .	street address)
New_Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	nt:
I hereby accept the appointment as registered agent. I am familia	r with and accept the obligations of the position.
Signatura of Nov	Registered Agent, if changing
Signature of New	registered rigeria, ij entanging
	i

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 Doc 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 Doc, 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	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	_Title	<u>Name</u>	<u>Addres</u> s
i) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
A) (1)			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
(Channe			
6) Change			-
Add			
Remove			

	(Be specific)	
		
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		_
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
f an amendment provides for an exch provisions 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:	
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	

The date of each amendment(s) adoption: July 137 2019 date this document was signed.	_, if other than the
Effective date if applicable: Tyly 15+ 2019 Ino 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 will a document's effective date on the Department of State's records.	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	
☐ 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 6/18/2019	
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)	-
Alexandra Hernandez (Typed or printed name of person signing)	
President (Title of person signing)	