PN000083933

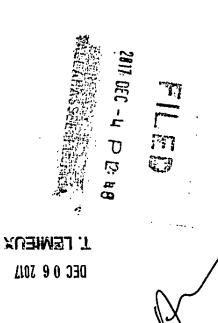
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TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Algae to Omega H	oldings, Inc.			
DOCUMENT NUM	1BER: P14000082933				
	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	tter to the following:			
	Raphael Dominguez				
		Name of Contact Persor	1		
	Algae to Omega Holdings, Inc.				
	-	Firm/ Company			
	5079 N Dixie Highway, Unit 314				
	-	Address	B-008 M117-		
	Oakland Park, FL 33334				
		City/ State and Zip Code	e		
info	@algae2omega.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	ion concerning this matter, pleas	se call: at (79 0-8674		
Name	e of Contact Person	at (Area Co	de & Daytime Telephone Number		
Enclosed is a check	for the following amount made		•		
\$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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

Algae to Omega Holdings, inc.	
(Name of Corporation as curre	ently filed with the Florida Dept. of State)
P14000082933	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	<u>.</u>
	The new
name must be distinguishable and contain the word "corpora" ("Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association," or the abbreviation	ation," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. P-to	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
, , , , , , , , , , , , , , , , , , , ,	
Date 19 of the Land Market Area	Allows to Electric and the second of the
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office address.	
-	
Name of New Registered Agent	
(Florida	a street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am familia	ent: iar with and accept the obligations of the position.
	B B I
Signature of Ne	ew Registered Agent, if changing
	The state of the s
	Sign Fig. 1

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.

X Change	<u>PT</u>	John Do	<u>ee</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) X Change	PSD		Raphael Dominguez	1314 East Las Olas Blvd. Unit 329
Add				Fort Lauderdale, FL 33301
Remove				
2) Change	D		Dev Dabas	3801 Collins Ave., Unit PH3
X Add				Miami Beach, FL 33140
Remove				
3) Change		_		
X Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change		_		
Add				
Remove				

f amending or adding additional Arti- Attach additional sheets, if necessary).	(Be specific)
	
	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
f an amandment provides for an evek	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) ad	option:	, if other than the
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 b document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date vortinent of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court	
	ed fiduciary by that fiduciary)	
	Raphael Dominguez	
	(Typed or printed name of person signing)	
	President & Director	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·