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To:

Division of Corporations

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Account Name : TAX, ACCOUNTING AND FINANCIAL EXPERTS, INC.

Account Number : I20120000058 Phone : (305)760-201

Phone : (305)760-2011 Fax Number : (866)895-8710

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Email Address: epuka76@aol.com

COR AMND/RESTATE/CORRECT OR O/D RESIGNED ASSET PLANNING SOLUTIONS REAL ESTATE ADVISORS INC

Certificate of Status	0
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T. LEMIEUX

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May 10, 2017

FLORIDA DEPARTMENT OF STATE

ASSET PLANNING SOLUTIONS REAL ESTATE ADVISORS, INC 1451 S. MIAMI AVE 1408 MIAMI, FL 33130

SUBJECT: ASSET PLANNING SOLUTIONS REAL ESTATE ADVISORS, INC

REF: P15000049421

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II FAX Aud. #: H17000126955 Letter Number: 917A00009280 05/17/17 11:04AM EDT Right Way Multiservices Corp -> 6380 Pg 3/7

Articles of Amendment to Articles of Incorporation

	01	
ASSET PLANNING	G SOLUTIONS REAL ESTATE ADVIS	ORS, INC
(Name of Corporati	ion as currently filed with the Florida I	Dept. of State)
P15000049421		
(Docur	nent Number of Corporation (if known)	· · · · · · · · · · · · · · · · · · ·
	,	
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	a Statutes, this Florida Profit Corporation	n adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
APS Advisors Group Inc.		The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	o," "Inc," or "Co". A professional corp	orporated" or the abbreviation
B. Enter new principal office address, if applicable		
(Principal office address <u>MUST BE A STREET ADI</u>		
	•••	
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BO	1V1	
(Maining address MAT BE A FOST OFFICE BU	<u> </u>	· · ·
D. If amending the registered agent and/or registered new registered agent and/or the new registered		name of the
Name of New Registered Agent		.
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	ustered Agent: I am familiar with and accept the obliga	tions of the position.
, , , , ,	, ,	<u> </u>
		1/2-2-2-2
Sign	nature of New Registered Agent, if changi	
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		A III: 38 FLORID
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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	PT	John Do	<u>œ</u>			
X Remove	<u>v</u>	Mike Jo	ncs			
_X Add	<u>sv</u>	Sally Sn				
Type of Action (Check One)	Title		Name			Address
l) Change		_		<u></u>		
Add				٠		
Remove						
2) Change						
Add		_			-	
Remove						
3) Change					_	
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Remove						
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4) Change		_			-	tracks and the second s
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Remove						
5) Change		_				
Add						
Remove						
6) Change						
Add	·					· · · ·
Remove						

f an amendment provides for an exchange, reclassification, or cancellation of issue provisions for implementing the amendment if not contained in the amendment its (if not applicable, indicate N/A)	
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	<u>d shares,</u> e <u>lf:</u>

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The date of each amendment(s) adoption:	, 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 block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes east 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 east for the amendment(s) was/were sufficient for approval	
by"	
(voling group)	
☐ 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 April 18th, 2017	
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)	
MAURICIO ANGARITA	
(Typed or printed name of person signing)	
President	
(Title of person signing)	