P15000054555

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP W	/AIT MAIL			
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: XOLUXIONS PR	OPERTY CORP.	
	JMBER: P15000054555		
The enclosed Arti	cles of Amendment and fee are si	ubmitted for filing.	
Please return all co	orrespondence concerning this ma	atter to the following:	
	Freddy II. Hernandez		
		Name of Contact Person	n
	XOLUXIONS PROPERTY	CORP.	
		Firm/ Company	
	3505 S Ocean Dr., Unit. 809.	,	
	·	Address	
	Hollywood, FL 33019		
		City/ State and Zip Cod	e
	investxol@outlook.com		
		sed for future annual report	notification)
For further informations	ation concerning this matter, plea	se call:	2801469
Nai	ne of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a checl	k for the following amount made	payable to the Florida Depa	urtment of State:
□ \$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 Division The Ce	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Articles of Amendment

to

Articles of Incorporation

of

	UI.	3
XOLUXIONS PROPERTY CORP.		
(Name of Corporati	ion as currently filed with the Florida Dept. o	f State)
P15000054555		
(Docur	ment Number of Corporation (if known)	
·	•	三 三 三
Pursuant to the provisions of section 607,1006, Florid its Articles of Incorporation:	la Statutes, this Florida Profit Corporation adop	ts the following amending
A. If amending name, enter the new name of the c	orporation:	. 0
ECOM XOLUXIONS CORP.		The nev
name must be distinguishable and contain the word "c "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbro	" or "Co". A professional corporation nam	
B. Enter new principal office address, if applicable		
(Principal office address <u>MUST BE A STREET AD)</u>	<u>DRESS</u>)	
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BO	<u> </u>	
D. If amending the registered agent and/or registe new registered agent and/or the new registered		of the
Name of New Registered Agent		
Name of New Regult/ea/igen		
	(Florida street address)	
	(Proma sireet address)	
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	lorida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	<u>gistered Agent:</u>	
· · · · · · · · · · · · · · · · · · ·	ature of New Registered Agent, if changing	

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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 Doc	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	dding additional Ar sheets, if necessary).	(Be specific)				
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· · · · · · · · · · · · · · · · · · ·	<u>=</u>					
					 	
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an amendment	provides for an exc	hange, reclassific	ation, or cancellat	ion of issued sha	res,	
provisions for in	nplementing the amo	endment if not co	ntained in the am	endment itself:		
(if not appue	able, indicate N/A)					
· · · · · · · · · · · · · · · · · · ·						

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after ame	endment file date)
Note: If the date inserted in this block does not meet the applicable statutory f document's effective date on the Department of State's records.	iling requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of director action was not required.	s without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of vote by the shareholders was/were sufficient for approval.	es cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting grow must be separately provided for each voting group entitled to vote separately.	
"The number of votes cast for the amendment(s) was/were sufficient for	approvat
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Signature (By a director, president or other officer – if directors selected, by an incorporator if in the hands of a recease appointed fiduciary by that fiduciary)	
Freddy H. Hernandez	
(Typed or printed name of person s	signing)
President	
(Title of person signing)	