P15000071607

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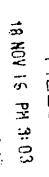
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TO: Amendment Section

Division of Corporations

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NAME OF CORPORATION: QualConex, Inc. DOCUMENT NUMBER: P15000071607 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Romney C. Rogers, Jr. Name of Contact Person Rogers, Morriz & Ziegler LLP Firm/ Company 1401 E. Broward Blvd. Suite 300, Address Fort Lauderdale, FL. 33301 City/ State and Zip Code jon.rivera@qualconex.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (310) 488-8404

Area Code & Daytime Telephone Number Jonathan Rivera Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee **\$35** Filing Fee **□\$43.75** Filling Fee & **□\$43.75** Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address **Street Address** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, Fl. 32301

Articles of Amendment to Articles of Incorporation of

Nexterys Inc.			
(Name of Corporation as current	ly filed with the Florida Dept. of State)		
P15000071607			
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the fo	llowing amendmen	nt(s) to
A. If amending name, enter the new name of the corporation:			
QualConex, Inc.		₹ The new	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name		
B. Enter new principal office address, if applicable:	7101 W McNab Rd. Suite 200		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Tamarac, FL. 33321		
			•
		- 1 8	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7101 W McNab Rd. Suite 200	B-77	<u> </u>
(maining duaress inter beat 1351 of the both	Tamarac, FL. 33321	7 70	m
		* TO	Ö
			
D. If amending the registered agent and/or registered office add		<u> </u> ω	
new registered agent and/or the new registered office addres	<u>s:</u>		
Name of New Registered Agent			
			
(Florida st	reet address)		
New Registered Office Address:	Florida, Florida		
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the pos	sition.	
Signature of Very	Registered Agent, if changing		
Signature of the ti	medianes an inform a community		

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: XChange	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
\underline{X} Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DPT	Gaston Brait	611 North Dairy Ashford Rd.
Add	-		Houston, TX 77079
X Remove			
2) X Change	DPS	Jonathan Rivera	7101 W McNab Rd. Suite 200
Add			Tamarac, FL. 33321
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Warmer Comment of the Comment	icles, enter change(s) here: (Be specific)	
 		
		_
 		
If an amendment provides for an eych	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
<u> </u>		
		-
		-

•	September 7, 2018	
	ent(s) adoption:	, if other than the
date this document was sign		
Effective date if applicable	September 7, 2018	
Enterve date <u>in apprication</u>	(no more than 90 days after amendment file date)	
	in this block does not meet the applicable statutory filing requirements, this date will in the Department of State's records.	not be listed as the
Adoption of Amendment(s	(<u>CHECK ONE</u>)	
	were adopted by the shareholders. The number of votes cast for the amendment(s) /were sufficient for approval.	
	were approved by the shareholders through voting groups. The following statement ided for each voting group entitled to vote separately on the amendment(s):	
	tes cast for the amendment(s) was/were sufficient for approval	
bv	(voting group)	
	(voting group)	
action was not required.	were adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/vaction was not required.	were adopted by the incorporators without shareholder action and shareholder	
	vember 1, 2018	
Signature	Gaston Brait Dynam upper by Gasto but	
O.g.i.i.i.	(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)	_
	Gaston Brait	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	