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COVER LETTER

Division of Corporations NAME OF CORPORATION: NUJENIX CORP DOCUMENT NUMBER: P15000100714 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **EIAL GOLAN** Name of Contact Person **NUJENIX CORP** Firm/ Company 5851 NW 159TH ST Address MIAMI LAKES FL 33014 City/ State and Zip Code NUJENIX@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305 Area Code & Daytime Telephone Number **EIAL GOLAN** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

NUJENIX CORP	
(Name of Corporation as c	currently filed with the Florida Dept. of State)
P15000100714	
(Document Nu	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporat	tion:
BULK OILSHIPPING & STORAGE CORP.	The new
	rporation," "company," or "incorporated" or the abbreviation c," 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. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	<u> </u>
	<u> </u>
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
Name of New Registered Agent	<u> </u>
• • • • • • • • • • • • • • • • • • • •	
(Fl	orida street address)
New Registered Office Address:	. Florida
New Registered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	
т негову иссерстве арротителя из гезимегей изели. Тит ја	анты тап ини иссері іне обидинонз ој те posmon.
Signature o	of New Registered Agent, if changing

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address
1) Change	VP	BROWN TUNJIE	15 TAYSIDE DR. EDGEWATER
Add			MIDDLESEX HA8RD
X Remove			UNITED KINGDOM
2) Change	<u>T</u>	SEKYRE IRENE	WHITE CROSS KASOA RD
Add			HS#105
X Remove			ACCRA GHANA W.AFRICA
3) Change	VP	GOLAN CHLOE	5851 NW 159 ST
Add			MIAMI LAKES FL 33014
X Remove			
4) Change	VP	GOLAN ELAN	5851 NW 159 ST
Add			MIAMI LAKES FL 33014
X Remove			
5) Change	VP	JUSTICE ASARE	PMB 323 Comm1
X Add			Tema Ghana
Remove			
6) Change	s	SEKYRE IRENE	White Cross Kasoa Rd HS#105
x Add			Accra Ghana West Africa
Remove			

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.

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Example: X Change	PT	John Do	<u>De</u>	
X Remove	Y	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	S		GOLAN ELAN	5851 NW 159 ST
X Add			•	MIAMI LAKES FL 33014
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add		_		
Remove			•	
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)
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	THE THE PARTY OF T
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	idment if not contained in the amendment itself:
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

The date of each amendment(s) as date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	plock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	proved 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 add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
APRIL 20, Dated	2018	
Signature	() lefur	
selecte	irector, president or other officer — if directors or officers have not been d, by an incorporator — if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	EIAL GOLAN	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	