P16000054065

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(Ad	dress)	
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(Cit	ry/State/Zip/Phone	÷#)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Axiom Secured Fi	nanciał Group	
DOCUMENT NUM	BER: P16000054065		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Roy Jones		
		Name of Contact Perso	n
	Axiom Secured Financial Grand	oup	
		Firm/ Company	
	CMR 467 Box 3918		
		Address	
	APO, AE 09096		
		City/ State and Zip Cod	e
Axio	msecured@gmail.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	e call:	
Roy Jones		at (260-2148
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	artment 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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Axiom Secured Financial Group Inc. (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered of fice address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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)

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 <math>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>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change	VP	Perlina Reyez	5704 Satinwood Way
Add X Remove			Temple Terrace, FL 33637
2) Change Add			<u> </u>
Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove Change			
Add			

Attach additional sheets, if necessary).	cles, enter change(s) (Be specific)				
				 	
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<u>f an amendment pro</u> vides for an excha	nge, reclassification,	or cancellation	of issued share:	S.	
provisions for implementing the amen	nge, reclassification, dment if not containe	or cancellationed in the amendr	of issued share: nent itself:	<u>5,</u>	
f an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	nge, reclassification, dment if not containe	or cancellation ed in the amendr	of issued share: nent itself:	<u>5,</u>	
<u>provisions for implementing the amen</u>	nge, reclassification, dment if not containe	or cancellation ed in the amendr	of issued share nent itself:	<u>. </u>	
provisions for implementing the amen	nge, reclassification, dment if not contains	or cancellation ed in the amend	of issued share nent itself:	S.	
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provisions for implementing the amen	nge, reclassification, dment if not contains	or cancellation ed in the amendr	of issued share nent itself:	S.	
provisions for implementing the amen	nge, reclassification, dment if not containe	or cancellation ed in the amend	of issued share.	S.	

	4/15/2017	
The date of each amendment(s) addate this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ 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) fficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
4/12/2017		
Dated	ghes	
(By a d	rector, president or other officer – if directors or officers have not been it, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Roy Jones	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	