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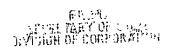
C LEWIS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	lviou, Inc	C			
DOCUMENT NUMBER	D4000	0055026			
The enclosed Articles of A	mendment and fee are su	bmitted for filing.			
Please return all correspon	dence concerning this ma	tter to the following:			
		Sonia Becerra			
-		Name of Contact Perso	n		
Firm/ Company					
	12605 East Freeway Suite 509				
<del></del>		Address			
Houston, Texas 77015					
		City/ State and Zip Cod	е		
	f	ilings@swyftfilings.co	om		
<del></del> -		sed for future annual report			
For further information co	ncerning this matter, pleas	se call: at (877	<sub>)</sub> 777-0 <b>4</b> 50		
	ontact Person		de & Daytime Telephone Number		
		payable to the Florida Depa	-		
<b>☑</b> \$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		Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301		

## Articles of Amendment to Articles of Incorporation of



Iviou, Inc

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(Name of Corporatio	on as currently filed with the Florida Dept. of State)
	P16000055026
(Docume	nent Number of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida s Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendmen
. If amending name, enter the new name of the cor	rporation:
ame must be distinguishable and contain the word Corp.," "Inc.," or Co.," or the designation "Corp,' ord "chartered," "professional association," or the a	The new d "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
. Enter new principal office address, if applicable; Principal office address MUST BE A STREET ADDI	
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u>x</u> )
. If amending the registered agent and/or registered new registered agent and/or the new registered o	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Office Address:  New Registered Agent's Signature, if changing Registered Agent. I hereby accept the appointment as registered agent.	(City), Florida (Zip Code)
Signa	ature 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)

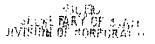
Please note the officer/director title by the first letter of the office title:

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 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	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	SEC	Jean-Marc Mezila	2465 SE 15th PL
Add			Homestead, FL 33035
X Remove			
2) Change	VP	Jean-Marc Mezila	2465 SE 15th PL
Add			Homestead, FL 33035
X Remove			
3) Change	DIR	Jean-Marc Mezila	2465 SE 15th PL
Add			Homestead, FL 33035
X Remove			
4) Change			
Add			
Remove			
5) Change	<del></del>	<del>-</del>	
Add			
Remove			
6) Change			
Add			
Damoua			

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	ch additional sheets, if necessary).	(Be specific)			
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The date of each amendment(s) adoption:	2194534 <b>18</b> 97 34	Mr GKAL O	_, if other than the
date this document was signed.	2016 OCT 25	PM 3: 45	<b></b> -
Effective date if applicable:	i 90 doys after amendment file dat	r)	<del></del>
Note: If the date inserted in this block does not meet the app document's effective date on the Department of State's records.		nts, this date will	not be listed as the
Adoption of Amendment(s) (CHECK ONE)			
☐ The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval.	the number of votes cust for the an	nendment(s)	
☐ The amendment(s) was/were approved by the shareholders to must be separately provided for each voting group entitled.			
"The number of votes east for the amendment(s) was/v	vere sufficient for approval		
by(voting group)			
(voting group)			
The amendment(s) was/were adopted by the board of direct action was not required.	ors without shareholder action and	shareholder	
☐ The amendment(s) was/were adopted by the incorporators watchin was not required.	ithout shareholder action and shar	cholder	
Dated10/17/2016			
Signature			
(By a director, president or other of selected, by an incorporator - if in appointed fiduciary by that fiduciar	the hands of a receiver, trustee, or		<del>-</del>
Steve	enson Perejuste		
(Typed or printe	d name of person signing)		<del></del>
	President		
	le of person signing)		