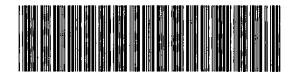
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SECRETARY OF STALL

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COVER LETTER

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TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: Lua Holdings, Inc. DOCUMENT NUMBER: P16000058115
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rachael Spiewak-Walhati Name of Contact Person
Name of Contact Person
Lua Holdings, Inc.
Firm/ Company
PO BX 292433 Davie, FL 33329
Address
Davie, FL 33329
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rachael Sprewak - Walholti at (404) 392-4597 Name of Contact Person Area Code & Davime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

FILED SECRETARY OF STATE MYISION OF CORPORATION

Lua t	holdings,	Inc.			2016 AUG 2	9 11	9 : 56
(<u>Name</u>	of Corporation as	currently f	iled with the	Florida Dept. of St	ate)		
	P16000.	58 U.S	5				
	(Document N	Number of C	orporation (if	known)			
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Stat	utes, this <i>Fle</i>	orida Profit C	orporation adopts the	he following an	nendme	nt(s) to
A. If amending name, enter the new r	name of the corpor	ation:					
					The	e new	,
name must be distinguishable and co "Corp.," "Inc.," or Co.," or the desig word "chartered," "professional associ	nation "Corp," "I	nc," or "Co	". A profess				
B. Enter new principal office address (Principal office address <u>MUST BE A</u> .		<u>ss</u>)					
C. Enter new mailing address, if app (Mailing address MAY BE A POST							
D. If amending the registered agent a new registered agent and/or the no			s in Florida, e	enter the name of t	<u>ne</u>		
Name of New Registered Agent							_
	385	Florida street	South address)	University	<u> Dr.</u> #	:29	243
	_ `		4447 (130)				
New Registered Office Address	: <u>Davie</u>		ity)	, Flori	da <u>3332</u> (Zip Code		799
					•		
New Registered Agent's Signature, if							
I hereby accept the appointment as regi	stered agent. I am	familiar wit	h and accept t	he obligations of the	e position.		
					•		
	Signature	of New Reg	istered 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	PT	John Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	Title		Name		<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					

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	f.amending or adding additional Arti Attach <i>additional sheets, if necessary).</i>	(Be specific)	
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	(if not applicable, indicate N/A)	nument it not contained in the amendment usen.	
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The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		FILEL SECRETARY OF STATE JIVISION OF CORPORATION
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	2016 AUG 29 AM 9: 56
Note: If the date inserted in this bl document's effective date on the Dep	lock does not meet the applicable statutory filing requirements, this partment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendme fficient for approval.	ent(s)
	roved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	older
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	:
Dated8/.	24/16	
selected	rector, president or other officer – if directors or officers have not be a nincorporator – if in the hands of a receiver, trustee, or other of the fiduciary by that fiduciary)	
	Rachael Spiewak Lualhat	1
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	