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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Naviop America In	e.	
DOCUMENT NUM	1BER: P17000005306		
	s of Amendment and fee are su	bmitted for filing.	
Please return all cort	respondence concerning this mat	tter to the following:	
	Alan Fyne		
		Name of Contact Person	l
	Dinnall Fyne & Company Inc	2 .	
		Firm/ Company	
	1515 N University Dr., Suite	, ,	
	·	Address	P 49
	Coral Springs, FL 33071		
		City/ State and Zip Code	2
afv	ne@dinnallfyne.com		
	-	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
Alan Fyne		954	de & Daytime Telephone Number
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	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)
A D P.	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assec, F1, 32301

Articles of Amendment to Articles of Incorporation of

Naviop America Inc.					
(Name of	Corporation as current	ly filed with the Florida Dept. of State	<u>e</u>)		
P17000005306					
-	(Document Number of	of Corporation (if known)			
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporation adopts the	following amer	ıdmen	ı(s) to
A. If amending name, enter the new nar	ne of the corporation:				
			The	F227141	
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associat	ition "Corp," "Inc," or	"Co". A professional corporation num	or the abbrevi	ation	
P. Enter new unincipal office address i	f nanlicable:	N/A			
B. Enter new principal office address, i (Principal office address MUST BE A ST				_	
			_5		
				7	
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C		N/A	22.2	Ē	1
(Stating dataress MAT DE ATOST C	DEFICE BOX		17 T.	ΓJ	
			10.4 23.4	<u>ი</u>	‡ ,
				-F.	, 1
			,	Ŀ'n	
D. If amending the registered agent and			,		
new registered agent and/or the new		<u> </u>			
Name of New Registered Agent	N/A				
	(Florida s	treet address)			
No. 11 of the Land Control of Library	N/A	, Florida			
New Registered Office Address:		(City)	(Zıp Code)		
New Registered Agent's Signature, if cl	nanging Registered Agen	ıt:			
I hereby accept the appointment as registe	ered agent – Lam familiar	with and accept the obligations of the p	oosition.		
	Cian name of Man	Registered Agent, if changing			
	Signature of New	negisterea agent, ij 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.

X Change	<u>PT</u> John	ı Dae	
\underline{X} Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P/D	Giuseppe Leoni	4477 NW 97 Ave
Add			Doral, FL 33178
X Remove			
2) Change	CEO/D	Luigi Leoni	4477 NW 97 Ave
Add			Doral, FL 33178
X Remove			
3) Change	S/T/D	Jeff Shoemaker	4500 S. 129th East Ave
XAdd			Suite 200
Remove			Tulsa, OK 74134
4) Change	P/D	Shawna Santos	10 Al Paul Lane
X Add			Suite 110
Remove			Merrimack, NH 03054
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Arti tach additional sheets, if necessary).	(Be specific)		
	t : "		
			<u> </u>
			
	_		
	<u> </u>		
			
			
an amendment provides for an exc	hanga raclussification or ca	ncellation of issued shares.	
orovisions for implementing the ame	endment if not contained in t	the amendment itself:	
(if not applicable, indicate N/A)			
	<u> </u>		
	<u></u>		
		,	· · · · · · · · · · · · · · · · · · ·

Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be fisted as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was were sufficient for approval. The amendment(s) was were approved by the shareholders through voting groups. The following statement must be separately provided for 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	86/15/2017 The date of each amendment(s) adoption:	if othe	er iban	ch.u
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The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Dated 6/17/ Signature (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) Left extra Shaemaker	☐ The amendment(s) was were adopted by the board of directors without shareholder action and shareholder action was not required.	AHASS	JUN 26	
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Jeffrey F. Shamaker	selected, by an incorporator - if in the hands of a receiver, trustee, or other court			
Jeffrey t. Shæmaker (Typed for printed name of person signing)	appointed fiduciary by that fiduciary)			
(15) becky without mane of person righting)	Jeffrey t. Shamaker			
\mathcal{C}	(Types prince name of person againg)			
SFL NEAS DENECTOR (Title of person signing)	SEC, INFAS DERECTOR			