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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ONLINE MATERIAL MAKETING IN
DOCUMENT NUMBER: P1700042065
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following
Name of Contact Person
MODE LOS MUSBINE 202
Ft. Lauder dale Fl 3550) City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Vame of Contact Person at 40 808 - 2011 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 Certificate of Status (Additional copy is enclosed) \$35 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address

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	Incor	poration
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	Articles of incorporation
Online Mat-	erial Marketing, Inc.
(<u>Name of Corpora</u>	ation as currently filed with the Florida Dept, of State)
71 7 0002	142065
(Day)	nument Number of Corporation (if known)
(1700)	tunem (various of Corporation (it known)
turstant to the provisions of section 607,1006, Florits Articles of Incorporation:	ida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s)
A. If amending name, enter the new name of the	corporation:
	The new
	ord "corporation," "company," or "incorporated" or the abbreviation or "Inc," or "Co". A professional corporation name must contain the he abbreviation "P.A."
3. Enter new principal office address, if applical	ble:
Principal office address MUST BE A STREET AI	DDRESS)
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE B	BOX_{I}
) If amending the registered agent and/or regist	tered office address in Florida, enter the name of the
new registered agent and/or the new registere	
	
Name of New Registered Agent	
	(Florida street address)
	(Furtal street address)
New Registered Office Address:	, Florida
•	(City) (Zip Code)
New Registered Agent's Signature, if changing R	Conictored Agents
hereby accept the appointment as revistered agent	t. I am familiar with and accept the obligations of the position.
and the second of the second o	· · · · · · · · · · · · · · · · · · ·
Si_1	gnature 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: XChange	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1)Change	T	Antunio Nunez	MOD E LOS Olas
Add			B. M. Ste 202
Remove			77. Land. Fl 33301
2) Change			
Add			
Remove			
3.)Change			
Add			
Remove			
4)Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
	
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<u> </u>	
an amendment provides for an exchorovisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
· - · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
Effective date <u>if applicable</u> : (no more than 90 days after amendm	ent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records	requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cas by the shareholders was/were sufficient for approval.	t for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on th	
"The number of votes cast for the amendment(s) was/were sufficient for appro-	val
by(voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action action was not required.	n and shareholder
Dated X. 6/19/2017 Signature X. Auton Dav	
(By a director, president or other officer – if directors or of	Ticers have not been
selected, by an incorporator - if in the hands of a receiver,	
appointed fiduciary by that fiduciary)	
Typed or printed name of person signing	
(Typed or printed name of person signing	ng)
Xi Trea surer (Title of person signing)	
(Title of person signing)	