P18000024320

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: DETRAXHING DOCUMENT NUMBER: P18000024320 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: James E. Larson, Esq. Name of Contact Person Firm/ Company 11605 Haynes Bridge Road, Suite 425 Address Alpharetta, Georgia 30009 City/ State and Zip Code james.larson@detraxi.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: James E. Larson, Esq. Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filling Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) 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 Incorporation of

DETRAXI INC.	
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P18000024320	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
 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 adnew registered agent and/or the new registered office address 	
-	331
Name of New Registered Agent	
(Florida :	street address)
New Registered Office Address:	, Florida
3	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia	r 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 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> <u>Joh</u>	<u>in Doe</u>	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Р	ANTHONY KEITH KING	268 HARROWDEN LANE
Add			CARDINGTON, BEDFORD
X Remove			BD MK443-ST UK
2) Change	PD	RANJEEV RAI	5 MANOR ROAD
X Add			RICHMOND, SURREY
Remove			TW9 1YD UK
3) Change	V D	JAMES E LARSON	11605 HAYNES BRIDGE ROAL
X Add			ALPHARETTA, GA 30009
Remove			US
4) Change	STD	ABHISHEK CHOUDHARY	8660 GRANVILLE AVENUE
X Add			RICHMOND, BC V6Y 3H2
Remove			CANADA
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)
	<u></u>
	<u> </u>
an amandment provides for an evol-	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	The state of the s

The date of each amendment(s) date this document was signed.	doption:, if other than the
Effective date if applicable:	
<u></u>	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were a by the shareholders was/were	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were a action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	opted by the incorporators without shareholder action and shareholder
AUGUS Dated Signature	
(By a selec	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	ANTHONY KEITH KING
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)