P18000029542

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PICK-UP WAIT MAIL
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(Document Number)
(Common to the company)
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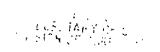


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2010 AUG 28 PM 2: 27

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: J2MA	INNOVATIONS INC.	
DOCUMENT NUMBER: P 18000C	29542	
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
JOEL Cutter	C	
JZMA In	Name of Contact Person \mathcal{C}^2 .	
	Firm/Company AUR 5.	
JI. Rofeish	U/Sh, 4/a, 33707 City State and Zip Code	
JOE Cutter 15 E-mail address: (to be used	Tor future annual report notification)	
For further information concerning this matter, please of	call:	
JOEC Cutter	407, 474. 9066	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made pay	yable to the Florida Department of State:	
\$35 Filing Fee \$\Bigcup \Bigcup \Bigcu	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)	
Mailing Address	Street Address	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	

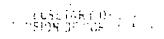
Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

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Articles of Incorporation



Articles of incorporatio

2010 AUG 28 PH 2: 27 INNOVATIONS. (Name of Corporation as currently filed with the Florida Dept. of State) 18000029542 Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar 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 Doc 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: \underline{X} Change	PT John Doc	
X Remove	<u>V</u> <u>Mike Jones</u>	
_X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	D DOBBS, ANGELL.	7051 Nucces Dr. TRUING, TX.
Add	U	IRving, TX.
X Remove		
2) Change	D Zitting, Jushua P.	8017 134h Ave. 5
Add		Fla. 33707
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

ach additional sheets, if necessary	r). (Be specific)			
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namendment provides for an evolvisions for implementing the a	change, reclassifica nendment if not con	tion, or cancellation tained in the amend	<u>of issued shares,</u> ment itself:	
(if not applicable, indicate N/A)				
-				
	<u> </u>			
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		MI		
				
			-	

The date of each amendment(s) adoption: 5/16/18 date this document was signed.	, if other than the
Effective date if applicable: 8/16/18	
(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 document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ 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	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated S/16/18 Signature Jawl (utter, Pros.	
(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)	
JOEL CUTTER	·
(Typed or printed name of person signing)	
Presiden T.	
(Title of person signing)	