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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: BURST HOLDING	S, INC.			
DOCUMENT NUMB	ER:				
The enclosed Articles of	of Amendment and fee are sub	mitted for filing.			
Please return all corres	pondence concerning this matt	er to the following:			
	DeAnna Montemayor				
•		Name of Contact Person			
	Wyoming Corporate Services, Inc.				
		Firm/ Company			
	1712 Pioneer Ave.				
	Address				
	Cheyenne, WY 82001				
		City/ State and Zip Code			
For further informatio	E-mail address: (to be us	ed for future annual report	notification)		
DeAnna Montemayor		at (632-3333		
	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	ertment 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)		
Am Div P.C	iling Address endment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Amend Division Cliftor 2661 E	Address Iment Section on of Corporations a Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Articles of Incorporation of

FILED

BURST HOLDINGS, INC.	2018 DEC 10.		
(Name of Corporation as currently	filed with the Florida Deprovisia 2 35		
P18000052741	SECRETARY OF STATE		
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	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 "corporation" ("Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "word "chartered," "professional association," or the abbreviation "	P.A."		
B. Enter new principal office address, if applicable:	651 E Woolbright Rd E405		
(Principal office address MUST BE A STREET ADDRESS)	Boynton Beach, FL 33435		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	651 E Woolbright Rd E405		
(Muting unit cos instrumento)	Boynton Beach, FL 33435		
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the		
new registered agent and/or the new registered office addres	<u>s:</u>		
Name of New Registered Agent			
(Elavida d	reet address)		
(Fiorial 3)			
New Registered Office Address:	(City) , Florida (Zip Code)		
	(City)		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	<u>t:</u> 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>	John Doe	
	<u> </u>	Mike Jones	
X Remove			
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	Gerald Pitts	1712 Pioneer Ave. Ste 7000
Add		-	Cheyenne, WY 82001
X Remove			
2) Change	P	Declan Morgan	651 E Woolbright Rd E405
X Add			Boynton Beach, FL 33435
Remove			
3) Change	-		
Add			
Remove			
4)Change			
Add			
Remove			
5) Change	-		
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amending o</u> (Attach <i>additio</i>	. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
			
neovisions i	nent provides for an exchange, reclassification, or cancellation of issued shares, or implementing the amendment if not contained in the amendment itself: oplicable, indicate N/A)		
 _			

The date of each amendment(s) at	loption:, if other than the
date this document was signed.	
Effective date if applicable:	
••••••••••••••••••••••••••••••••••••••	(no more than 90 days after amendment file date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) fficient for approval.
The amendment(s) was/were approvided for	proved by the shareholders through voting groups. The following statement 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	(voting group)
· ==	(voting group)
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder
November Dated	29, 2018
selecti	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 inted fiduciary by that fiduciary)
	Gerald Pitts
	(Typed or printed name of person signing)
	Secretary
	(Title of person signing)