P18000060932

(Ře	equestor's Name)	
(Ac	ldress)	
(Ac	dress)	
(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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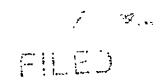
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ASTEM VENTUE	RES INC.	
	ER: P18000060932		
The enclosed Articles of	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	pondence concerning this ma	itter to the following:	
	ASLAN OMER KIRIMLI		
	. 0.71). 4.14). 2774 (1). 1.2 (1). (2)	Name of Contact Person	1
	ASTEM VENTURES INC.		
	2613 NW 38TH STREET	Firm/ Company	
•		Address	
	BOCA RATON, FL 33434		
•		City/ State and Zip Cod	2
aok.hi	os@gmail.com		
		sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
ASLAN OMER KIRIMLI		917 at (971-5957 de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment of State:
S35 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)
Ame Divis P.O.	ing Address Indiment Section Identification of Corporations Box 6327 Inassee, FL 32314	Amend Divisio Clitton 2661 E	Address Iment Section on of Corporations Building Accutive Center Circle ussee, F1, 32301

Articles of Amendment to Articles of Incorporation of



ASTEM VENTURES INC.

(<u>Name of Corporati</u>	on as currently filed with the Fforida Dept. of State)
P1S000060932	ZUIS HAT ZO TO WE WIT
	nent Number of Corporation (if known) [ALLAMA JELL FLORIDA a Statutes, this Florida Profit Corporation adopts the following amendment(s)
as Attacks of meorpolation.	
A. If amending name, enter the new name of the co	orporation:
	The new
	d "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BO.</u>	<u>\(\lambda \) \(\lambda \) \</u>
 If amending the registered agent and/or register new registered agent and/or the new registered of 	
new registered agent and/or the new registered (unice address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi	istered Agent:
hereby accept the appointment as registered agent. I	I am familiar with and accept the obligations of the position.
Sione	ature 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, an 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	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
T) Change	VP	UMEROV, RUSTEM	550 S. OCEAN BLVD
Add			APT 406
X Remove			BOCA RATON, FL 33432
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Adđ			
Remove			

If amending or adding additional Arti- Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate NA)	endment if not contained in the angeneration reserve

The date of each amendment(s)	adoption;	, if other than th
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date of Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were as by the shareholders was/were	lopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided for	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated/	May 22 2019 A. Omer Living	
select	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 tiduciary by that fiduciary)	
	ASLAN OMER KIRIMILI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	