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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Zero GRAVITY Scie	ences, Inc.
DOCUMENT NUMBER: <u>P180000 6 2 1 1 1</u>	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Charles J Scimeca Name of Contact Person Lero Gravity So Firm/ Company	
325 Sw 15th Av.	enue
Pompana Beach, & City/ State and Zip Code	=L 33069
E-mail address: (to be used for future annual report notifi	cation)
For further information concerning this matter, please call:	
Charles J Scinoch at (949) Name of Contact Person Area Code &	3 55-8714 Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Departmen	nt of State:
Certificate of Status Certified Copy (Additional copy is enclosed)	552.50 Filing Fee Certificate of Status Certified Copy Additional Copy is enclosed)
Mailing AddressStreet AddrAmendment SectionAmendmentDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildTallahassee, FL 323142661 Execut	Section Corporations

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

	of		
ero	GRAVITY	Sciences	IN
ame of Co	progration as currently	v filed with the Florida	Dept. of

Pursuant to the provisions of section 607.1006,	Florida Statutes.	this <i>Florida</i>	Profit Corporation	adopts the foll	lowing amend	iment(s) to
its Articles of Incorporation:						

Zero	3 GRAVITY	Sciences, I	MC.	
(Name of	Corporation as current	ly filed with the Florida Dept	t. of State)	
P18	000062111			
	(Document Number o	of Corporation (if known)		
Pursuant to the provisions of section 607.19 its Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporation ac	dopts the following amendment	
A. If amending name, enter the new name	ne of the corporation:			
W/A			The new	
name must be distinguishable and conta "Corp" "Inc.," or Co.," or the designa word "chartered," "professional associati	tion "Corp," "Inc," or '	"Co". A professional corpord	orated" or the abbreviation ution name must contain the	
B. Enter new principal office address, if (Principal office address MUST BE A ST		n/A		
			· · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if application (Mailing address MAY BE A POST O		NIA		
D. If amending the registered agent and new registered agent and/or the new			ne of the	
Name of New Registered Agent	Alm		5 6 Ti	
-	(Florida st	reet address)		
New Registered Office Address:			Florida 3	
	(City)		(Zip-Code)	
New Registered Agent's Signature, if che I hereby accept the appointment as register			s of the position.	
	Signature of New I	Revistered Avent 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	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>ŞV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Joseph Paulik	15800 Pines Blud
Add			Pembroke Pines, FL
Remove			33027
2) X Change	PD_	DAVID Pollock	325 SW 15th Ave
Add			Pampano Beach, Fl
Remove			33069
3) Khange	VPD	Charles J Schnech	325 SWISTH Ave
Add			Pompano Beach, Fl
Remove			33069
A) (C)			6
4) Change			
Add			
Remove			<u> </u>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
NIA		
	···	
		
	7	
	: <u>.</u> ;	
	<u> </u>	AUG.
	· .	-B
	*-	'
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	-, ` `	₹ =: •:
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	Ŧ.;;	 ਫ਼ਾ
	:-	
WA		
		· -

The date of each amendment(s) adoption: _ date this document was signed.	JULY 24	2019	, if other than the
Effective date if applicable:			
sweetive date ir applicable.	(no more than 90 days o	ıfter amendment file dase)	
Note: If the date inserted in this block does document's effective date on the Department of		atutory filing requirements, this	s date will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)		
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number approval.	r of votes cast for the amendme	ent(s)
☐ The amendment(s) was/were approved by t must be separately provided for each votin			ement
"The number of votes cast for the am	endment(s) was/were suffic	ient for approval	
by	oting group)		
☐ The amendment(s) was/were adopted by th action was not required.	e board of directors without	shareholder action and shareho	older
☐ The amendment(s) was/were adopted by th action was not required.	e incorporators without sha	reholder action and shareholder	
Dated July	24 2019		19
Signature <u>Uh. 1</u>	bin_		
(By a director, pro		directors or officers have not be	een (;)
		of a receiver, trustee, or other of	court S - CO
appointed fiducia	ry by that fiduciary)		
	narles J Sci	m ec.A	<u> </u>
	(Typed or printed name of	person signing)	UA.
	VP		
	(Title of perso	n signing)	