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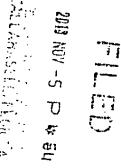
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J. FEMIERIX NOA 0 3 5018



COVER LETTER

TO: Amendment Section Division of Corporations

. .

NAME OF CORPO	RATION: MTen7 Inc			
DOCUMENT NUM	BER: P18000066098			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.		
Please return all corre	spondence concerning this ma	utter to the following:		
	William Baird			
		Name of Contact Person	n	
	MTen7 Inc			
		Firm/ Company		
	25941 US HIGHWAY 19 N			
		Address		
	CLEARWATER, FL 33766			
		City/ State and Zip Cod	e	
h 477	7.1 0 "			
Mie	n7.Inc@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
William Baird		916 at (613-3837	
Name	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	iling Address		Address	
Amendment Section		Amendment Section		
	ision of Corporations . Box 6327	Division of Corporations Clifton Building		
Tallahassee, Fl. 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently filed with the Florida Dept. of State) NOV -5 P + 50 MTen7 Inc P18000066098 (Document Number of Corporation (if known) 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: N/A 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." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing 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) (Zip Code) 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 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	Yosef Chefran	25941 US HWY 19 N. #15931
X Add			CLEARWATER, FL 33766
Remove			
2) Change	N/A		
Add			
Remove			
3) Change	N/A		
Add			
Remove			
4) Change	N/A		
Add			
Remove			
5) Change	N/A		
Add			
Remove			
Kemove			
6) Change	N/A		
Add			
Remove			

. . . . E. If amending or adding additional Articles, enter change(s) here: '(Attach additional sheets, if necessary). (Be specific) * Please add this FEIN to this Corporation: 83-1401726 F. 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) N/A

	N/A	
The date of each amendment(s) a date this document was signed.	loption:	, if other than th
nate 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 I document's effective date on the De	plock does not meet the applicable statutory filing requestrates and state's records.	uirements, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast fo ifficient for approval.	r the amendment(s)
	proved by the shareholders through voting groups. The each voting group entitled to vote separately on the an	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by N/A		
· · · · · · · · · · · · · · · · · · ·	(voting group)	•
action was not required.	opted by the board of directors without shareholder action a	
10/31/2013		
Dated	·	
	ار این	
Signaturei		<u> </u>
selecte	irector, president or other officer — if directors or officed, by an incorporator — if in the hands of a receiver, truited fiduciary by that fiduciary)	
	William Baird	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

. . . .