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(Business Entity Name)	
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## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations			
NAME OF CORPORATION: VOLTA 10N, CORP.			
DOCUMENT NUMBER: P 180000 77 092			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Vicky Perry Name of Contact Person VOLTA ION, CORP. Firm/ Company			
VOLTA ION, CORP.			
5335 NW 8746 Ave C109-210 Address			
DORAL, FL 33179  City/ State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Chris Rourk at (305) 978-8110  Name of Contact Person Area Code & Daytime Telephone Number			
Name of Contact Person Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:			
S35 Filing Fee			
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment

to

## Articles of Incorporation

οf

NOLTA ION, CORP	2019 007 21 PM 5: 56
(Name of Corporation as curren	itly filed with the Florida Dept. of State)
P18000077092	· · · · · · · · · · · · · · · · · · ·
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
NIA	The new
name must be distinguishable and contain the word "corporat, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	2103 Coral Way 2nd Floor
	Hiami, FL 33145
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5335 NW 87th Ave
	C109-210
	DORAL FL 33179
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered Agent N	
N LA (Florida )	street address)
New Registered Office Address: N/A	(City), Florida N/A
	(on court
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian	nt: r with and accept the obligations of the position.
N/A	
	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> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PT	HARVEY ROBERS	44 W Flogler Street
Add			#1100
_X_ Remove			MIAMI, FL 33/30
2) Change	PT	Victoria Perry	5335 NW 874 Clue
X Add		,	C109-210
Remove			DOLAL, FL 33179
3 ) Change	Miami Liasul	V Christopher Rourk	5335 NW 8746 Que
Add		·	C108-210
_X Remove			DONAL, FL 33179
4) Change			
Add			<del></del>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
N/A	
<u> </u>	
	-
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	
<u> </u>	

The date of each amendment(s) adoption:	, if other than th
Effective date if applicable: 1//7	
(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date w document's effective date on the Department of State's records.	ill not be listed as th
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 east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ 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 10   11   2019	
Signature	
(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)	
Christopher Rourk	
(Typed or printed name of person signing)	<u> </u>
Miami Liason. (Title of person signing)	
( Little of percon community	