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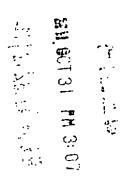
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## COVER LETTER

TO: Amendment Section Division of Corporations

		COVERLETTER		_
FO: Amendment Section Division of Corporati	ions			
NAME OF CORPORAT	TON: ASM MARKE	SOLUTION CORP.		
OOCUMENT NUMBER	. P18000085057			
The enclosed Articles of z	]	re submitted for filing.		2
lease return all correspor	idence concerning th	is matter to the following:		
AR	TURO GATICA			
<del></del>		Name of Contact Persor	1	
ASE	и market solution	1 .:		
82	3 SAWDUST TRAIL	Firm/ Company		
		Address		
KIS:	SIMMLE, FL 34744			
		City/ State and Zip Cod	¢.	
ARTUR	ro@aslightingserv			
	E-mail address: (td	be used for future annual report	notification)	
For further information co	oncerning this matter	please call:		
ARTURO GATIÇA		. at ( <sup>954</sup>	663-1281	
Name of C	Iontact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for th	e following amount (	made payable to the Florida Dep	artment of State:	
S35 Filing Fee	□S43.75 Filing Fo Certificate of Sta	tus Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amend Divisio P.O. Be	g Address inent Section in of Corporations ox 6327 issec. FL 32314	Amenor   Divisi   Cliftor   2661	Address diment Section on of Corporations a Building Executive Center Circle	

## Articles of Amendment to Articles of Incorporation of

ASIM MARKET SOLUTIONS CORP.

(Name of Corporation as current	ly filed with the Florida	(Dept. of State)
P180000E5057		
(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corpora	ion adopts the following amendments
A. If amending name, enter the new name of the corporation:		
N/A	; }	The new
name must be distinguishable and contain the word "corporatio" Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered." "professional association," or the abbreviation	"Co". A professional di	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	N/A .	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		ne name of the
Name of New Registered Agent N/A	'	
CFlorida st	reet address)	
New Registered Office Address: N/A	<u></u>	, Florida
	(City)	(Zıp Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obl	gations of the position.
The state of the s		, ,
Signature of New	Registered Agent, if cha	lging

address of each Office (Attach additional shee Please note the officer P - President; V - Vic Executive Officer; CF held President, Treass Changes should be no	er and/or Direct vts, if necessary) director title by ve President: Tr O = Chief Finar over, Director we ted in the followi leaves the corpo	or being added:  the first letter of the office title:  Treasurer, S= Secretary; D=  wial Officer, If an officer/dire  and be PTD,  ing manner, Currently John De-  ration, Sally Smith is named the	e of each officer/director being removed and title, name, and Director: TR= Trustee: C Chairman or Clerk, CEO Chiector holds more than one title, list the first letter of each office of is listed as the PST and Mike Jones is listed as the V. There is eV and S. These should be noted as John Doe, PT as a Change
X Change	PT Joh	n Doe	
X Remove	<u>V</u> <u>Mi</u>	se Jones	
<u>X</u> Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	v	j CARLOS JAVIER MARCHEN	IA 823 SAWDUST TRAIL, KISSIMMEE, FL 34744
Add		]:	
Remove			
7. ("		;	
2) Change			
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مرية. The date of each amendment(s	) adoution:		, if other than the
late this document was signed.	y adoption:		,
·	1.431/1010		
Effective date <u>if applicable</u> :	5/31/.:019	1 (0.1	
		(no more than 90 days after amendment file date)	
Note: If the date inserted in the locument's effective date on the		not meet the applicable statutory filing requirements, this date will not state's records.	ot be listed as the
Adoption of Amendment(s)	( <u>C</u>	IECK ONE)	
The amendment(s) was/were by the shareholders was/wer		shareholders. The number of votes east for the amendment(s) approval.	
The amendment(s) was/were must be reparately provided	approved by the for each voting	shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the am	endment(s) was/were sufficient for approval	
by		· · · · · · · · · · · · · · · · · · ·	
	/\	oting group)	
☐ The amendment(s) was/were action was not required.	adopted by th	board of directors without shareholder action and shareholder	
□ The amendment(s) was/were action was not required.  Dated 9/₹3/	/2019	r incorporators without shareholder action and shareholder	
Signature	ARM		_
(B		sident or other officer - if directors or officers have not been	
		corporator – if in the hands of a receiver, trustee, or other court	
ар	pointed fiducia	rý by that fiduciary)	
	ARTUR	GATICA	
		(Typed or printed name of person signing)	
	PRESIDE		
		(Title of person signing)	
		1 *	