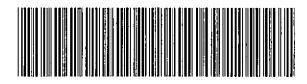
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R. HUNT 06/13/23

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: GILLDAX CONSU	ILTING CORP			
	BER: P21000012086			_	
The enclosed Articles	s of Amendment and fee are sul	omitted for filing.			
Please return all corre	espondence concerning this mat	ter to the following:			
	OLGA ADRIANA MORENO)			
		Name of Contact Person	n		2
	WXC CORPORATION				23 JUN 13 PH 6:50
		Firm/ Company	 -		
	8240 NW 52nd TERRACE S	UITE 305			ယ
		Address		<u> </u>	ם
	DORAL, FL 33166			m S	οċ
		City/ State and Zip Cod	e	— AT	50
	AMORENO@WXCCORP.C	OM			
	_	ed for future annual report	notification)	_	
	`	•	,		
For further information	on concerning this matter, pleas	e call:			
OLGA ADRIANA MORENO		at (305-676-6576		
Name of Contact Person		Area Code & Daytime Telephone Number			
Enclosed is a check for	or the following amount made a	payable to the Florida Dep	artment of State:		
☐ \$35 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Ameno Divisio	Address Iment Section on of Corporations entre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

GILLDAX CONSULTING CORP

(Name of Corporation	n as currently filed with the Flo	orida Dept. of State)	_
P21000012086			
(Docume	ent Number of Corporation (if kr	nown)	
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corp	noration adopts the following	g amendment(s) to
A. If amending name, enter the new name of the cor	poration:		
HOLISTICA MANAGEMENT GROUP CORP			_The new
name must be distinguishable and contain the word "cor "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrevi	or "Co". A professional corp	orporated" or the abbreviation or the orbital poration name must contain	on "Corp.,"
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDR	RESS)		
		The second secon	
C. Enter new mailing address, if applicable:			い。 『聖覧
(Mailing address MAY BE A POST OFFICE BOX		<u>်ကိုလု</u>	P (11)
		m s	ರು 🦺
		TE	50
D. If amending the registered agent and/or registere		ter the name of the	
new registered agent and/or the new registered of	ffice address:		
Name of New Registered Agent			_
			_
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip)	Code)
New Registered Agent's Signature, if changing Regis	stered Agent		
I hereby accept the appointment as registered agent. I		obligations of the position.	
e: :	www.of.Von. Donings	ahamina	_
Signat	ure of New Registered Agent, if	спануту	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	<u>John Doe</u>	
X Remove	$\underline{\mathbf{Y}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		<u></u>	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			- <u> </u>
Add			
Remove			
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	
	
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an amendment provides for an exchange, reclassification, or cancellation of issued sha	ares,
provisions for implementing the amendment if not contained in the amendment itself:	ares,
an amendment provides for an exchange, reclassification, or cancellation of issued shaper or ovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	ares,
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provisions for implementing the amendment if not contained in the amendment itself:	ares,
provisions for implementing the amendment if not contained in the amendment itself:	ares,

The date of each amendment(s date this document was signed.	adoption:			, if other than the
Effective date <u>if applicable</u> : _				
	(no more than 90 days after amendm	ent file date)		
Note: If the date inserted in the document's effective date on the	block does not meet the applicable statutory filing Department of State's records.	requirements	s, this date wil	I not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors with	thout shareho	lder action and	i shareholder
■ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cas sufficient for approval.	st for the ame	endment(s)	
	approved by the shareholders through voting groups. or each voting group entitled to vote separately on th			
"The number of votes of	ast for the amendment(s) was/were sufficient for appro	oval	;;·.	요 2
by		<u></u> .:		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(voting group)		至美	
April 27 Dated	2023		SSEI	PO
Signature	GILLES DANDRIEUX		STATE E. FL	ED 6: 50
(By sele	director, president or other officer – if directors or of sted, by an incorporator – if in the hands of a receiver, inted fiduciary by that fiduciary)			
	GILLES DANDRIEUX			
	(Typed or printed name of person signi	ng)		
	PRESIDENT			
	(Title of person signing)			