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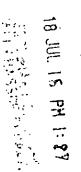
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GASCOM, INC.		
DOCUMENT NUMB	ER:		<u></u>
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	RUSSELL D. KAPLAN, ES	Q.	
-	·	Name of Contact Persor	
	RUSSELL D. KAPLAN, P.A		•
•		Firm/ Company	
	7951 SW 6TH STREET, STE	E 210	
-	-	Address	
	PLANTATION, FL 33324		
-		City/ State and Zip Code	
Russk	@rdkpa.com		/
	•	ed for future annual report	notification)
For further information Russell Kaplan	concerning this matter, pleas		763-7777
<u> </u>	f Contact Person	ai () 763-7777 de & Daytime Telephone Number
	the following amount made p		
■ \$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 Tallahassee, FL 32314		Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle issee, FL 32301

Articles of Amendment to Articles of Incorporation of

GASCOM, INC.			
(Name	of Corporation as currently	filed with the Florida Dept. of State)	
P98000001206			
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006. Florida Statutes, this Fi	lorida Profit Corporation adopts the fol	lowing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	action "Corp," "Inc," or "Co	o". A professional corporation name i	
B. Enter new principal office address,			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		20 CD
			事一
			100 m
C. Enter new mailing address, if appl	icable:		-o [17]
(Mailing address MAY BE A POST			<u> </u>
			
D. If amending the registered agent ar new registered agent and/or the ne		ss in Florida, enter the name of the	
Views of View Businstand Course	RICHARD E. PALACIOS		
Name of New Registered Agent	348 E. GARDEN COVE CI	RCLE	
	(Florida stree	<u> </u>	
	DAVIE	333	325
New Registered Office Address:		Florida	(Zip Code)
	(**	,	(my cour)
New Registered Agent's Signature, if c	hanging Registered Agent:		
I hereby accept the appointment as regist		th and accept the obligations of the posi	tion.
	A).		
	Cinnature of Name Day	mistorael Ament, if chemoina	

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: XChange	<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) X Change	þ	RICHARD E. PALACIOS	348 E. GARDEN COVE CIRCLE
Add			DAVIE, FL 33325
Remove			
2) Change	vs	RAUL E. PALACIOS II	2150 NW 105 LANE
Add			CORAL SPRINGS, FL 33071
X Remove			
3) Change	<u>S</u>	CHRISTINE A. PALACIOS	348 E. GARDEN COVE CIRCLE
X Add			DAVIE, FL 33325
Remove			
4) X Change	VT	RAUL E. PALACIOS	16041 EMERALD COVE RD
Add			WESTON, FL 33331
Remove			
5) Change			
Add			
Remove			
б) Change			-
Add			
Remove			

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)	/A	additional sheets	s, y necessary).	(Be specific)				
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)								
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(if not applicable, indicate N/A)	provis	sions for implem	enting the ame	endment if not co	ntained in the ar	nendment itself:	·	
A	(i)	f not applicable, i	indicate N/A)					
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The date of each amendment(s) adoption:	the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.	the
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 cast 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.	
(2/3) .2018	
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)	
RICHARD E. PALACIOS	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	