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C. GOLDEN JUN 2 1 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	TRAX USA CORF	o ·			
DOCUMENT NUME	P99000012619				
The enclosed Articles	of Amendment and fee are sub	omitted for filing.			
Please return all corres	spondence concerning this mat	ter to the following:			
	HENRY PARRA				
		Name of Contact Person	1		
	TRAX USA CORP				
		Firm/ Company			
	2601 S BAYSHORE DRIVE, STE 500				
	Address				
	COCONUT GROVE, FL 33133				
		City/ State and Zip Cod	e		
henry	r@trax.aero				
	E-mail address: (to be use	ed for future annual report	notification)		
For further information	n concerning this matter, please	e call:			
HENRY PARRA		305	662-7400 X101		
Name o	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made p	avable to the Florida Dens	artment of State:		
izherosed is a cheek to	i me whowing unrount made p	mynole to the 1 lorida Dept	attient of valle.		
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)		
Mailing Address		Street	Address		
Ame	Amendment Section Amendment Section				
	Division of Corporations Division of Corporations				
	Box 6327	Clifton Building			
l'all:	ahassee, FL 32314		xecutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

TRAX USA CORP.			2	018 JUN 20	PM 1 . 00
(Name o	f Corporation as curren	itly filed with the Florid	a Dept. of State)		ात ५: नु
P99000012619			ΤÀ	SECRETARY ALLAHASSE	UF STATE
	(Document Number	of Corporation (if known	1)		e-r-LORI DA
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, thi	s Florida Profit Corpora	ntion adopts the fo	llowing amend	ment(s) to
A. If amending name, enter the new na	me of the corporation:				
				The 1	lew
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associat	ttion "Corp," "Inc," or	"Co". A professional c			
B. Enter new principal office address, i	f applicable:	2601 S BAYSHOF	RE DRIVE, STE	500	
(Principal office address <u>MUST BE A ST</u>		COCONUT GROV	COCONUT GROVE, FL 33133		
					_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2601 S BAYSHOF	RE DRIVE, STE	500	_
		COCONUT GROVE, FL 33133			
		-			_
D. If amending the registered agent and new registered agent and/or the new			he name of the		
Name of New Registered Agent	HENRY PARRA				
	2601 S BAYSHORE	DRIVE, STE 500			
	(Florida s	street address)			
New Registered Office Address:	COCONUT GROVE	Ξ	, Florida	3133	
		(City)	,	(Zip Code)	_
New Registered Agent's Signature, if ch					
I hereby accept the appointment as registe	red agent. I am familiai	r with and accept the obli	igations of the pos	ition.	

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 Doc 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		Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	VD	LIDIA JUNCO	21 MADEIRA AVE., #12
Add X Remove			CORAL GABLES, FL 33134
2) X Change	PDCEC	JOSE ALMEIDA	2601 S BAYSHORE DR
Add			SUITE 500
Remove			COCONUT GROVE, FL 33133
3) Change	STD	HENRY PARRA	2601 S BAYSHORE DR
X Add			SUITE 500
Remove			COCONUT GROVE, FL 33133
4) X Change	vcoo	HENRY PARRA	2601 S BAYSHORE DR
Add			SUITE 500
Remove			COCONUT GROVE, FL 33133
5) Change	VD	CHRISTOPHER I. REED	2601 S BAYSHORE DR
X Add			SUITE 500
Remove			COCONUT GROVE, FL 33133
6) Change			·
Add			
Remove			

	. (Be specific)	
		·
	, <u>, , , , , , , , , , , , , , , , , , </u>	- -
All		,
		
If an amendment provides for an ex-	hange, reclassification, or cancellation of issued sha	res.
provisions for implementing the an	change, reclassification, or cancellation of issued sha tendment if not contained in the amendment itself:	res,
If an amendment provides for an ex- provisions for implementing the an (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued sha nendment if not contained in the amendment itself:	res,
provisions for implementing the an	change, reclassification, or cancellation of issued sha tendment if not contained in the amendment itself:	res,
provisions for implementing the an	change, reclassification, or cancellation of issued sha nendment if not contained in the amendment itself:	res,
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provisions for implementing the an	change, reclassification, or cancellation of issued sha nendment if not contained in the amendment itself:	res,
provisions for implementing the an	change, reclassification, or cancellation of issued sha rendment if not contained in the amendment itself:	res,

The date of each amendment(s) adop	tion:	, if other than the
date this document was signed. Effective date if applicable:	JUNE 14, 2018	
	(no more than 90 days after amendment f	ile date)
Note: If the date inserted in this bloc document's effective date on the Depar	k does not meet the applicable statutory filing requirement of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for client for approval.	the amendment(s)
	ved by the shareholders through voting groups. The fight voting group entitled to vote separately on the am	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/were adopte action was not required.	d by the board of directors without shareholder actio	on and shareholder
☐ The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action an	d shareholder
JUNE 14 Dated	, 2018	
Signature		
(By a directed, t	etor, president or other officer – if directors or officer by an incorporator – if in the hands of a receiver, trust fiduciary by that fiduciary)	
	HENRY PARRA	
	(Typed or printed name of person signing)	
	SECRETARY	
	(Title of person signing)	