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NAME OF CORPORA	TION: SBD/PS Inc.		
DOCUMENT NUMBER	R: <u>P040000553</u>	78	
The enclosed Articles	of Amendment and fe	e are submitted for filling.	•
Please return all correa	pondence concerning to	his matter to:	• , , , ,
	Carol A. Simis		
	Withers Berran		
	Firm/Company 167 Church St		
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	New Haven, C City, State and		<u> </u>
Email a	tdevlin@daszki ddress (to be used for f	albo(ton.com uture annual report notification)	
For further information of	oncoming this matter, p	please call:	
Joseph W. More		-974-0401 Area Code & Daytime Telepho	one Number
Enclosed is a check for I			•
☐ \$36.00 Filling Fee	S43.75 Filing Fee & Certificate of Status		\$52.50 Filling Fee, Certificate of Status & Certificate Copy (Additional Copy is enclosed)

Articles of Amendment Tó

Articles of Incorporation
of
SBD/PS, Inc.
Name of Corporation as currently filed with Florida Dept. of State

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts

. If amending name, enter the new name of th	e corporation:	ent.
North View/PS, Inc.	. 7 10	The
w name must be distinguishable and contain the t the abbreviation "Corp.", "Ino.", or "Co.", or t	vord "corporation", "00	mpany," or "incorporate
ofessional corporation name must contain the wo		
breviation "P.A.".		TOTAL GOODS WILLIAM TO THE
•		•
Enter new principal office address, if appli		<u></u>
rincipal office address MUST RE A STREET	<u>ADDRESS</u>	
·		
Enter new mailing address, if applicable:		
falling address MAY BE A POST OFFICE BO	2X	
•		
		•
If amending the registered agent and/or regist	ered office address in F	loride, enter the name (
If amending the registered agent and/or regist the new registered agent and/or the new regis		
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the new registered agent and/or the new regis Name of New Registered Agent: New Registered Office Address: When Registered Office Address: When Registered Office Address: When Registered Agent's Signature, if changing is reby accept the appointment as a registered agent.	Florida stre City Registered Agent;	et address, Florida, Zip Code
the new registered agent and/or the new registered Agent: Name of New Registered Agent: New Registered Office Address: w Registered Agent's Signature, if changing is reby accept the appointment as a registered agent position.	Florida stre City Registered Agent;	et address, Florida, Zip Code and accept the obligation

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If amonding 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: Type of Action Title Address Name Director 1691 Michigan Ave., Suite 500 Miami Beach, FL 33139 ⊠ Add □ Remove Arthur S. Agatston ⊠ Add □ Remove Director Sari Agatston 1691 Michigan Ave., Suite 500 Miami Beach, FL 33139 Add Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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

Ø	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.
	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.
	Arthur S. Agatston (Typed or printed name of person signing)
	President (Title of person signing)

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