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(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: QUATRRO	PROCESSING S	SOLUTIONS INC	
DOCUMENT NUMI	BER: P0700006291	0		
	of Amendment and fee are sub			
Please return all corres	spondence concerning this mat	ter to the following:		
	SHYAM SUNDAF	R VAIDHYANAT	HAN	
	Name of Contact Person			
		Firm/ Company		
6400 SHAFER COURT, SUITE 250				
	ROSEMONT, IL 6	Address 30018		
		City/ State and Zip Code		
shyam.sundar@quatrro.com E-mail address: (to be used for future annual report notification)				
For further information	n concerning this matter, pleas	e call:		
	40	at (_)le & Daytime Telephone Number	
Name	of Contact Person	Area Coo	le & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	rtment 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)	
Amo Divi P.O	ling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E:	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301	

Articles of Amendment Articles of Incorporation

QUATRRO PROCESSING SOLUTIONS INC

(Name of Corporation as currently filed with the Florida Dept. of State) PO700062910

F0100002310		Black Sail on Black File of the	ri(·
(Document Number of Co	orporation (if known)		-
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	tatutes, this Florida Pro	fit Corporation adopts the followin	g amendment(s) to
A. If amending name, enter the new name of the corp	oration:		
			_The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co". A pro	iny," or "incorporated" or the a ofessional corporation name must	bbreviation contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	<u>ESS</u>)		-
			_
			_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			-
			-
			_
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		ida, enter the name of the	
Name of New Registered Agent			
	(Florida sireet address)		
New Registered Office Address:	(City)	, Florida(Zip Code)	-
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I describe the appointment as registered agent.		cept the obligations of the position.	

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 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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	Τ	SHYAM SUNDAR VAIDHY	6400 SHAFER COURT
Add			SUITE 250
Remove			ROSEMONT IL 60018
2) Change	P	MARK RISCH	6400 SHAFER COURT
Add			SUITE 250
Remove			ROSEMONT IL 60018
3) Change	D	GREG BOTTO	1350 BAYSHORE
Add			HIGHWAY SUITE 630
Remove			BURLINGAME CA 94010
4) Change	· 		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti-	ves, enter change(s) here:	
(Attach additional sheets, if necessary).	(Be specific)	
		
		
VA		
it an amendment provides for an exch	ange, reclassification, or cancellation of issued shared and ment if not contained in the amendment itself:	res.
(if not applicable, indicate N/A)	idment if not contained in the amendment inch:	
(i) not appacable, marcule 14/A)		
		

The date of each amendment(s) adoption: 8TH APRIL, 2014	, if other than t
date this document was signed.	
Effective date if applicable: 8TH APRIL, 2014	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendmen by the shareholders was/were sufficient for approval.	ıt(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following state, must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"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.	lder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature (Rending to the second of the seco	
(By a director, president or other officer – if directors or officers have not bee selected, by an incorporator – if in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)	
AMITABH JOHRI	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	