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SECRETARY OF STATE
TALLAHASSEE. FLORIDA

Amend

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	T D SOLUTIONS SERVICE	S INC.		
DOCUMENT NU	JMBER:	P08000010791			
The enclosed Artic	cles of Amendment and fee	e are submitted for filing.			
Please return all co	orrespondence concerning	this matter to the following:			
		JAIME GUARNIZO Name of Contact Person	<u> </u>		
	T D SC	DLUTIONS SERVICES INC. Firm/ Company			
		13552 EYAS RD.			
	Address				
	ORLANDO FL 32837				
	sergio	City/ State and Zip Code			
	E-mail address: (to be u	@transpremier.com used for future annual report notification)			
For further informa	ation concerning this matte	er, please call:			
RI	UBEN D. TORO	at (407)37	' 0-6445		
Name	of Contact Person	Area Code & Daytime Tele	ephone Number		
Enclosed is a check	k for the following amount	made payable to the Florida Depart	ment of State:		
	\$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)		
P.O. Box 6	it Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	÷		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

TAISECRETARY PHIE. OO of T D SOLUTIONS SERVICES, INC.

(Name of Corporation as curre	ntly filed with	<u>the Florida Dep</u>	t. of State	Cc.
P080	000010791		**	103
(Document Num	ber of Corporat	ion (if known)		1/
Pursuant to the provisions of section 607.1006 imendment(s) to its Articles of Incorporation:	, Florida Statu	tes, this <i>Florida</i>	Profit Corporation adopts	the
A. If amending name, enter the new name of	the corporatio	<u>n:</u>		
				The r
name must be distinguishable and contain the subbreviation "Corp.," "Inc.," or Co.," or the suame must contain the word "chartered," "prof	designation "C	orp," "Inc," or	"Co". A professional cor	' or porat
B. Enter new principal office address, if appl		13552 EYAS	S RD	
Principal office address <u>MUST BE A STREET</u>		ORLANDO I	FL 32837	
C. Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFIC</u>	<u>E BOX</u>)			
). If amending the registered agent and/or re	gistered office	address in Flor	ida, enter the name of the	
new registered agent and/or the new regist				
Name of New Registered Agent:				
New Registered Office Address:	(Flori	da street address	9)	
-	/C:+.\		Florida	
	(City)		(Zip Code)	
ew Registered Agent's Signature, if changing	g Registered A	gent:		
hereby accept the appointment as registered ag	ent. I am fami	tiar with and acc	ept the obligations of the p	ositie
-				
Siz	gnature of New	Registered Agen	t, 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)

of Action
Add Remove
add Remove
add Remove
ares,

The date of each amendment(s) adoption: 06/02/2009		
 Effective date <u>if applicable</u> :	06/02/2009	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following statement of 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	27	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_June	2/2009	
Signature	pianos,	
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	Jaime Guarnizo	
	(Typed or printed name of person signing)	
	Vice-President	
	(Title of person signing)	