## P1000012235

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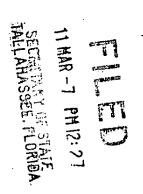
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF COR	PORATION:	Medalitics Software, In	ic.	
DOCUMENT NU	JMBER:	P10000012235		
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.		
Please return all co	orrespondence concerning the	is matter to the following:		
	<del></del>	Ronald MacInnis		
	N	lame of Contact Person		
	Med	lalitics Software, Inc.		
		Firm/ Company		
	5019 Shoreline Circle			
		Address		
	S	Sanford, FL 32771		
	C	ity/ State and Zip Code		
	ron.macine E-mail address: (to be use	nis@broadorbit.com d for future annual report notification)		
For further informa	ation concerning this matter,	please call:		
R	onald MacInnis	at ( 407 ) 3	74-2241	
Name	of Contact Person	Area Code & Daytime Tel	ephone Number	
Enclosed is a checi	k for the following amount m	nade payable to the Florida Depart	tment 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle	e	

Tallahassee, FL 32301

## **Articles of Amendment**

	Articles of incorporation	The second
	of	Dept. of State CAHASSEE, PLORIDA
Medalitic	cs Software Inc.	MAR - 7 PM in
(Name of Corporation as curr	ently filed with the Florida I	Dept. of State 27
P10	0000012235	- SEE COLATE
(Document Nur	mber of Corporation (if known	) LORIDA
ursuant to the provisions of section 607.100 mendment(s) to its Articles of Incorporation:	06, Florida Statutes, this Flori	ida Profit Corporation adopts the follow
. If amending name, enter the new name o	of the corporation;	
Store Br	rand Products, Inc.	The new
ame must be distinguishable and contain bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered," "proceed."  Enter new principal office address, if approximation is approximately and the contain the word.	e designation "Corp," "Inc," ofessional association," or the	or "Co". A professional corporation
rincipal office address <u>MUST BE A STREE</u>	ET ADDRESS )	
Principal office address <u>MUST BE A STREE</u> . Enter new mailing address, if applicable (Mailing address <u>MAY BE A POST OFFI</u>	ET ADDRESS )  EL STANDORESS   S	lorida, enter the name of the
Principal office address MUST BE A STREE  . Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI)  . If amending the registered agent and/or	ET ADDRESS )  EL STANDORESS   S	lorida, enter the name of the
Principal office address MUST BE A STREE  Letter new mailing address, if applicable (Mailing address MAY BE A POST OFF)  Letter new mailing address, if applicable (Mailing address MAY BE A POST OFF)  Letter new mailing address, if applicable (Mailing address MAY BE A POST OFF)  Letter new mailing address, if applicable (Mailing address MAY BE A POST OFF)  Letter new mailing address, if applicable (Mailing address MAY BE A POST OFF)	ET ADDRESS )  EL STANDORESS   S	
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)  If amending the registered agent and/or new registered agent and/or the new registered Agent:	ET ADDRESS )  CE BOX)  registered office address in Fistered office address:	

I hereby accept the appointment as registered agent. I am familiar with and accept 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)

<u>Title</u>	<u>Name</u>	Address	<b>Type of Action</b>
DVP	Ron Geguzys	5020 Shoreline Circle Sanford, FL 32771	☑ Add □ Remove
<del></del>			
(attach ad	lditional sheets, if necessary). (Be spe	ecific)	
<u>provisio</u>	nendment provides for an exchange, rons for implementing the amendment of applicable, indicate N/A)		
		<del>.</del>	
			<del>*************************************</del>

The date of each amendment(s) adoption: March 2, 2011				
	(date of adoption is required)			
(no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.			
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):			
"The number of votes cast i	or the amendment(s) was/were sufficient for approval			
by	"			
(voti	ng group)			
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder			
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder			
Dated	arch 2, 7011			
Signature	Jane Jon G			
selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)			
	Ron MacInnis			
_	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			