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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: LOYAL	TY SERVIC	ES MDA, INC.		
DOCUMENT NUMBE	111200	0094023	· · · · · · · · · · · · · · · · · · ·		
The enclosed Articles of	Amendment and fee are sul	bmitted for filing.			
Please return all correspo	ondence concerning this ma	tter to the following:			
	BUBIA	ARAUJO			
_		Name of Contact Persor	1		
_	LOYALTY	SERVICES I	MDA, INC		
	5173 AN	LIGATOR F	LAG LN		
_	0	BLANDO, FL City/ State and Zip Code	32811		
_			MAIL COM notification)		
For further information c	concerning this matter, pleas	se call:			
	ARAUJO	act_407	de & Daytime Telephone Number		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee	\$\$43.75 Filing Fee & Certificate of Status **Term of Status** **Term 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)		
	ig Address		Address		
	dment Section of Corporations		Iment Section on of Corporations		
	lox 6327		entre of Tallahassee		
Tailah	assee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, Ft. 32303			

Articles of Amendment Articles of Incorporation

LOYALTY SERVICES MDA, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P13000094023

nt(s) to

(Document Nur	nber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statute its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendme
A. If amending name, enter the new name of the corporati	<u>on:</u>
	The new
	on," "company," or "incorporated" or the abbreviation "Corp.," o" A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered offic	and durantin Elizabeth and another manner of the
new registered agent and/or the new registered office a	
Name of New Registered Agent	
tFlo	rida sireet (iddress)
Vin Parist west Office Advance	Florida
New Registered Office Address:	tCuy) Zip Coder
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fait	
Thereby accept the approximent as registered agent. That fair	und the warder of the position.
Signature of	New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607,0120 (11) (e). F.S.

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 De	<u> </u>			
X Remove	<u>v</u>	Mike Jo	<u>mes</u>			
X Add	<u>8V</u>	Sally St	<u>nith</u>			
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s	
1) Change	<u>CF0</u>	<u>-</u>	PAULO	CYSNEIROS	3332 ROBERT TRENT	JONESD
X Add					UNIT 208	
Remove					ORLANDO, FL 328	35
2) Change		_				
Add						
Remove 3) Change		-			****	
Add						
Remove						
4) Change		_				
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Remove						
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6) Change		_				
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an amendment provi	des tor an exchan	ige, reclassific	ation, or cancel	nation of issued s	hares,	
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	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	tno more than 90 days after amendment file date	
	tno more than 90 days after amendment file date	/
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirement partment of State's records.	as, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareh	older action and shareholder
Zi The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the an flicient for approval.	iendment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendme	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated <u>0 子</u> /	29/20	
selected	rector, president of other officer – if directors or officers have I, by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	

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