

P93000020659

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

10 OCT -7 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

RECEIVED

10 OCT -7 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COR AMND/RESTATE/CORRECT OR O/D RESIGN
NOESIS CAPITAL CORP.

Certificate of Status	0
Certified Copy	1
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10/7/2010
10/7/10
TV

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Noesis Capital Corp.

DOCUMENT NUMBER: P93000030659

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Kennedy

Name of Contact Person

ITAFS Holdings

Firm/ Company

100 SE 2nd Street, Suite 4700

Address

Miami, FL 33131

City/ State and Zip Code

mkennedy@investors-trust.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Kennedy

Name of Contact Person

at (305)

603-1400
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Noesis Capital Corp.

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

P93000030659

(Document Number of Corporation (if known))

10 OCT -7 PM 3:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. Amending name, enter the new name of the corporation:

ITA Financial Services Inc.

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

100 SE 2nd Street
Suite 4700
Miami, FL 33131

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: CT Corporation System

New Registered Office Address: 1200 S. Pine Island Road
(Florida street address)

Plantation, Florida 33324
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Barbara A. Burke
Signature of New Registered Agent, if changing

Barbara A. Burke
Special Assistant Secretary

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>	<u>Address</u>	<u>Type of Action</u>
<u>Director</u>	<u>Nico B Letschert</u>	<u>1801 Clint Moore Rd</u> <u>Boca Raton, FL 33487</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Director</u>	<u>William Zelaya</u>	<u>100 SE 2nd Street</u> <u>Suite 4700</u> <u>Miami, FL 33131</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Director</u>	<u>Wes John Pritchett</u>	<u>259 Buttonwood Drive</u> <u>Key Biscayne, Florida 33149</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> 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)

The date of each amendment(s) adoption: October 1, 2010
(date of adoption is required)

Effective date if applicable: _____
(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 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.

Dated October 6, 2010

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)

Ed Coloma
(Typed or printed name of person signing)

President
(Title of person signing)