# PO-1000123627

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### COVER LETTER

Division of Corporations	
NAME OF CORPORATION: FUZON SOFTWARE INC.	
DOCUMENT NUMBER: P0700012 3627	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
MUHAMMAD M. ZAMAN  Name of Contact Person	
FUZON SOFTWARE INC.	
16105 COLCHESTER PALMS DR.	
TAMPA FL 33647  City/ State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
MUHAMMAD M. ZAMAN at (813) 977 7480  Name of Contact Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & Certificate of Status \$\b	sed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	

Tallahassee, FL 32301

#### **Articles of Amendment**

to

#### **Articles of Incorporation**

of

Name of Corporation as currently filed with the Florida Dept. of State)  POTOCOL 36 2 1  (Document Number of Corporation (if known)  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. If amending name, enter the new name of the corporation:  WINNERS HOSPITALITY INC.  The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co". A professional corporation amen 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)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the enew registered agent and/or the new registered office address:  Name of New Registered Agent:  New Registered Agent:  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.	FUZON SOF	TWAR	E_	INC.		
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NINNERS HOSPITALITY 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)  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:  New Registered Office Address:  (Florida street address)  , Florida (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:		Florida Statute	es, this <i>Floi</i>	rida Profit Co	<i>rporation</i> ad	opts the following
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C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  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 address:  Name of New Registered Agent:  New Registered Office Address:  (Florida street address)  Florida (City) (Zip Code)  New Registered Agent:	abbreviation "Corp.," "Inc.," or Co.," or the a	lesignation "Co	orp," "Inc,"	or "Co". A	professional	ted" or the corporation
(Mailing address MAY BE A POST OFFICE BOX)    Comparison of the registered agent and/or registered office address in Florida, enter the name of the mew registered agent and/or the new registered office address:    Name of New Registered Agent:						
Name of New Registered Agent:  New Registered Office Address:  (Florida street address)  , Florida  (City)  New Registered Agent's Signature, if changing Registered Agent:	(Mailing address <u>MAY BE A POST OFFIC</u>					<del></del>
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, Florida, City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	Name of New Registered Agent:		,			
(City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	New Registered Office Address:	(Florid	da street add	dress)		
(City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:					Florida	
	_	(City)				<del></del>
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	New Registered Agent's Signature, if changing	Registered A	gent:			
				l accept the ob	ligations of t	he 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	Type of Action
			☐ Add☐ Remove
			☐ Add ☐ Remove
<del></del>			Add   Remove
	nding or adding additional Articles additional sheets, if necessary). (Be		
provi	amendment provides for an exchan sions for implementing the amendment fnot applicable, indicate N/A)		
		- <u>-</u>	

The date of each amendment(s	) adoption:	5/28	109	<del></del> ;
Effective date <u>if applicable</u> : _	TUNE  (no more than 90 days	01,20	09	
,	no more than 90 aays	ajter amenament ju	e aate)	
Adoption of Amendment(s)	(CHECK (	ONE)		
The amendment(s) was/were by the shareholders was/wer	adopted by the sharehe sufficient for approve	olders. The number	r of votes cast for the an	nendment(s)
The amendment(s) was/were must be separately provided				
"The number of votes ca	ast for the amendment(	s) was/were sufficie	ent for approval	
by			,,	
(	voting group)			
The amendment(s) was/were action was not required.	adopted by the board	of directors without	shareholder action and	shareholder
The amendment(s) was/were action was not required.	adopted by the incorp	orators without shar	eholder action and share	eholder
DatedN	1AY 28	2009		
selec	director, president or	- if in the hands of	ectors or officers have not a receiver, trustee, or of	
			ZAMAN son signing)	
	(Typed or	printed name of per	son signing)	
	PRI	ESIDEN	<u>T.</u>	
	(Title of person	n signing)		