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Office Use Only



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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Motorola Solutions, Inc. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Judith Jean-Pierre, Assistant Secretary and Senior Commercial Counsel, Legal, Governme Name of Contact Person Motorola Solutions, Inc. Firm/ Company 500 West Monroe Street, 43rd Floor Address Chicago, IL 60661 City/ State and Zip Code Judy.Jean-Pierre@motorolasolutions.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954) 547-4037

Area Code & Daytime Telephone Number Judy Jean-Pierre Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$43.75** Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Motorola Solutions, Inc.				
(<u>Name of</u>	Corporation as current	ly filed with the Florida Der	ot. of State)	
830046				
	(Document Number o	f Corporation (if known)		
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporation a	dopts the following	g amendment(s) to
A. If amending name, enter the new nan	ne of the corporation:			
No change				The new
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associati	tion "Corp," "Inc," or '	'Co". A professional corpor		breviation
B. Enter new principal office address, if applicable:		500 West Monroe Street		
(Principal office address MUST BE A STREET ADDRESS)		Chicago, IL 60661		
C. Enter new mailing address, if application (Mailing address MAY BE A POST O				
D. If amending the registered agent and new registered agent and/or the new	registered office address		me of the	
Name of New Registered Agent	No change			
	(Florida str	reet address)		
New Registered Office Address:		(City)	_, Florida(Zip (Code)
New Registered Agent's Signature, if chall thereby accept the appointment as register	red agent. I am familiar		ns of the position	Exemple of the second of the s
	Signature of 110H P			

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> <u>Je</u>	ohn Doe	
X Remove	<u>V</u> <u>M</u>	<u> Mike Jones</u>	
X Add	<u>sv</u> <u>s</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	Robert E. Marshall, Jr.	1700 Belle Meade Court
X Add			Lawrenceville, GA 30043
Remove			**************************************
2) Change	SPTVP	Marshall Wright	1700 Belle Meade Court
X Add			Lawrenceville, GA 30043
Remove			
3) Change	ASM	Robert/Bob Busch	167 Seville Chase Drive
X Add			Winter Springs, FL 32708
Remove			
4) Change	AS	Judith Jean-Pierre	9870 NW 49th Place
X Add			Coral Springs, FL 33076
Remove			
5) Change	AS	Richard Brancale	335 Adams Street, Suite 2706 - 112
X Add			Brooklyn, NY 11201
Remove			
6) Change	TVP	Randy Johnson	341 Cool Springs Boulevard
x Add	·····		Suite 300
Remove			Franklin, TN 37067

	May 17, 2016		
	adoption:	, if othe	r than the
date this document was signed.			
M Effective data if applicables	lay 17, 2016		
Effective date <u>if applicable</u> :	(no more than 90 days o	after amendment file date)	_
Note: If the date inserted in this document's effective date on the		atutory filing requirements, this date will not be lis	ted as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number sufficient for approval.	or of votes cast for the amendment(s)	
	pproved by the shareholders through vot or each voting group entitled to vote sep		
"The number of votes ca	st for the amendment(s) was/were suffici	ient for approval	
by	(voting group)	27	
	(voting group)		
■ The amendment(s) was/were a action was not required.	dopted by the board of directors without	t shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without share	reholder action and shareholder	
	er 21, 2016		
DatedSignature	June to		
	director, president or other officer - if o		
	ted, by an incorporator - if in the hands	of a receiver, trustee, or other court	
_ appo	inted fiduciary by that fiduciary)		
**************************************	Judith Jean-Pierre		
	(Typed or printed name of	f person signing)	-
	Assistant Secretary and Senior Comm	nercial Counsel	
	(Title of perso	on signing)	-