

F1 D000003515

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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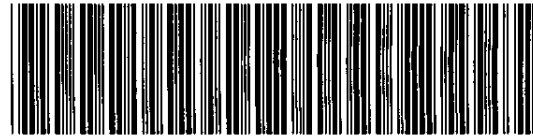
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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10/26/12--01029--001 \*\*35.00

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For: Amd/nc

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12 NOV 26 PM 4:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ProconGPS, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** F10000003515

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dionne Wadsworth  
Name of Contact Person

Incorp Services, Inc.  
Firm/Company

2360 Corporate Circle Suite 400  
Address

Henderson, Nevada 89074  
City/State and Zip Code

pmessing@spireon.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dionne Wadsworth at ( 702 ) 866-2500  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:



\$35.00 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 30, 2012

DIONNE WADSWORTH  
INCRP SERVICES, INC.  
2360 CORPORATE CIRCLE, SUITE 400  
HENDERSON, NV 89074

SUBJECT: PROCONGPS, INC.  
Ref. Number: F10000003515

We have received your document for PROCONGPS, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The wrong form was submitted.

Please provide certification of the name change only all other filed amendments are not required.

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Thelma Lewis  
Document Specialist Supervisor

Letter Number: 712A00026525

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12 NOV 26 AM 10:11  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 30, 2012

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Thelma Lewis  
Document Specialist Supervisor

Letter Number: 712A00026525

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO**  
**APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

(Pursuant to s. 607.1504, F.S.)

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

F10000003515

(Document number of corporation (if known))

1. PROCONGPS, INC.  
(Name of corporation as it appears on the records of the Department of State)
2. Tennessee 3. 08/02/2010  
(Incorporated under laws of) (Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 03/12/2012
5. Spireon, Inc.  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "Incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

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N/A  
(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

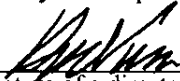
6. If the amendment changes the period of duration, indicate new period of duration.

N/A  
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

N/A  
(New jurisdiction)

8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

✓   
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Ken Vines  
(Typed or printed name of person signing)

Secretary  
(Title of person signing)



**STATE OF TENNESSEE**  
**Tre Hargett, Secretary of State**  
Division of Business Services  
William R. Snodgrass Tower  
312 Rosa L. Parks AVE, 6th FL  
Nashville, TN 37243-1102

INCORP  
DIONNE WADSWORTH  
STE 400  
2360 CORPORATE CIR  
HENDERSON, NV 89074-7739

November 7, 2012

**Control # 616830**

Effective Date: 03/12/2012

Receipt # : 844926

Filing Fee: \$20.00

### **CERTIFICATE OF NAME CHANGE**

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that Articles of Amendment of **ProconGPS, Inc.** were filed in this office on the effective date noted above, changing the name to **Spireon, Inc.**.

A handwritten signature in black ink that reads "Tre Hargett".

Tre Hargett  
Secretary of State

Processed By: Sheila Keeling



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

Attached are forms for a change of name, duration, jurisdiction, or purpose for a foreign profit or not for profit corporation qualified to do business or conduct its affairs in Florida as required by section 607.1504 or 617.1504, Florida Statutes. The following requirements should be met after the occurrence of such a change within 30 days for a not for profit corporation and within 90 days for a profit corporation. **NOTE: The purpose can be amended only on a not for profit corporation.**

- Complete the appropriate application for amendment attached to this letter.
- An original certificate or a document of similar import from the state of incorporation evidencing the amendment must be submitted with the application. The certificate must be issued within the past 90 days.
- Fees for the amendment are:

<b>Filing Fee</b>	\$ 35.00 (Includes a letter of acknowledgment)
<b>Certified Copy (optional)</b>	\$ 8.75
<b>Certificate of Status (optional)</b>	\$ 8.75
- Send one check in the total amount made payable to the Florida Department of State.
- Please include a letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

**Mailing Address:**  
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