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COVER LETTER

| TO: Amendment Section Division of Corporations |
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| NAME OF CORPORATION: INTELLEX CORPORATION |
| DOCUMENT NUMBER: M 53434 |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| LUCIUS SMEJDA Name of Contact Person |
| , |
| LEX INTERNATIONAL |
| Firm/ Company |
| 100 SE 2nd St. \$2222 |
| Address |
| Miami, FL 33131 City/ State and Zip Code |
| Ćity/ State and Zip Code |
| E-mail address: (to be used for future annual report notification) |
| E-mail address: (to be used for future annual report notification) |
| |
| For further information concerning this matter, please call: |
| 10) For the first the first that the |
| Lucius Smejda at (305) 358-9990 |
| 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 Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy |

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

is enclosed)

Articles of Amendment to Articles of Incorporation

of

| (Name of Corporation as currently filed with the Florida Dept. of State) MS3434 (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: 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 "charted," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Mailling address MAY BE A FOST OFFICE BOX) C. Enter new mailing address, if applicable: (Mailling 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 (Florida street address) New Registered Agent's Signature, if changing Registered Agent. (City) Florida Signature of New Registered Agent, if changing Signature of New Registered Agent, if changing | INTELLEX GORP | ORATION |
|--|--|---|
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| Name of New Registered Agent (Florida street address) New Registered Office Address: (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. | | 199 E. Flagler Street |
| Name of New Registered Agent (Florida street address) New Registered Office Address: (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. | | Miami, FL 3313年 元 |
| (Florida street address) New Registered Office Address: | D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address | lress in Florida, enter the name of the s: |
| New Registered Office Address: | Name of New Registered Agent | ### ### ### ### ### ### #### ######### |
| (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. | (Florida si | (reet address) |
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| I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. | (City | (Zip Code) |
| Signature of New Registered Agent, if changing | | |
| | 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)

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.

| Example: X Change | PT John | Doe | |
|-------------------------------|----------------------|--------------|---|
| X Remove | <u>V</u> <u>Mike</u> | : Jones | |
| X Add | SV Sally | Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| Change Add Remove | DP | L. Smith | 150 SE 2nd Avenue Suite 1002 Miami, FL 33131 |
| 2) Change Add | VPT | A. Alexander | Suite 1002 |
| Remove 3) Add Remove | _5_ | L. Smejda | Miani, FL 33131 100 SE 2nd Street Suite 2222 Miani, FL 33131 |
| 4) X Change Add Remove | <u>AS</u> | T. Sem | 150 SE 2nd Avenue Suite 1002 Miami, FL 33131 |
| 5) Change Add Remove | | | |
| 6) Change Add Remove | | | |

| amending or adding additional Artic tach additional sheets, if necessary). | (Be specific) |
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| an amendment provides for an exch | nange, reclassification, or cancellation of issued shares, |
| (if not applicable, indicate N/A) | ndment if not contained in the amendment itself: |
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| The date of each amendment(s) adoption: _ date this document was signed. | Dec 1, 2014 | , if other than the |
|---|---|--|
| Effective date if applicable: | - Dec, 1, 2014 | |
| _ | (no more than 90 days after amendment file date) | |
| Adoption of Amendment(s) (C | CHECK ONE) | |
| The amendment(s) was/were adopted by the by the shareholders was/were sufficient fo | he shareholders. The number of votes cast for the amendment(s r approval. | s) |
| | the shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s): | ent en |
| "The number of votes cast for the am | endment(s) was/were sufficient for approval | |
| by | roting group) | |
| | ne board of directors without shareholder action and shareholder | er |
| The amendment(s) was/were adopted by the action was not required. | ne incorporators without shareholder action and shareholder | |
| Dated Dec. 8 Signature | | |
| selected, by an ir | esident or other officer — if directors or officers have not been acorporator — if in the hands of a receiver, trustee, or other courary by that fiduciary) | TALL |
| | (Typed or printed name of person signing) | EC 12 |
| | SECRETARY (Title of person signing) | |