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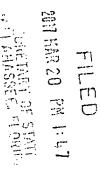
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Jeffrey I	Davis Consulting, Inc.		
DOCUMENT NUMBER: P0000002079	91		
The enclosed Articles of Amendment and		3.	
Please return all correspondence concerni	ng this matter to the follow	ing:	
Jeffrey Davis, Pres			
	Name of Con	tact Person	
Jeffrey Davis Cons	sulting, Inc.		
	Firm/ Co	mpany	
904 Pinebrook Ct.			
	Addre	ess	
Ponte Vedra Beach	a, FL 32082		
	City/ State and	d Zip Code	,
jeff@ecorpus.com			
E-mail address	s: (to be used for future ann	ual report	notification)
For further information concerning this ma	atter, please call:		
Jeffrey Davis	at (04	260-2040
Name of Contact Person	\	Area Coc	le & Daytime Telephone Number
Enclosed is a check for the following amount	unt made payable to the Flo	orida Depai	rtment of State:
\$35 Filing Fee \$43.75 Filing Certificate of		ру	□\$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	S	Division Clifton	Address nent Section n of Corporations Building tecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Jeffrey Davis Consulting, Inc.		
(Name of Corpora	ation as currently filed with the Florida	Dept. of State)
P0000020791		
(Doc	nument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this Florida Profit Corporation	n adopts the following amendment(s)
A. If amending name, enter the new name of the	corporation:	
		The new
name must be distinguishable and contain the w. "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or the B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ALL) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B)	rp," "Inc," or "Co". A professional cor he abbreviation "P.A." ble: DDRESS)	orporated" or the abbreviation
D. If amending the registered agent and/or regist new registered agent and/or the new registere		name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		tions of the position.
Sia	anature of New Registered Agent if changi	na

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	Corri B. Davis	904 Pinebrook Ct.
XAdd			Ponte Vedra Beach, FL 32082
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	heets, if necessary).	(Be specific)				
	,	(Bo specific)				
						
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	<u></u>					
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f an amendment p	rovides for an excha	moe, reclassifics	ition, or cancells	ition of issued sh	ares.	
<u>provisions for imp</u>	lementing the amen	dment if not cor	itained in the an	nendment itself:		
(if not applicab	ble, indicate N/A)					
						

	January 1, 2017	
The date of each amendment(s)	doption:	, if other than the
date this document was signed.	4.2015	
Jar Effective date <u>if applicable:</u>	nuary 1, 2017	
a apprication	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date wi epartment of State's records.	ll not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	
action was not required.	spece by the mediporators without shareholder action and shareholder	
January Dated	., 2017	
Signature		
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Jeffrey G. Davis	
	(Typed or printed name of person signing)	<u></u>
	President, Secretary	
	(Title of percon signing)	