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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
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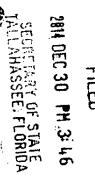
Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporation			
	DEO Brofe	ecionale Inc	
	ATION: PEO Profe		
DOCUMENT NUMB	_{ER:} <u>P010000101</u>	64	Million Control Control
The enclosed Articles of	of Amendment and fee are su	binited for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
	IM Rubin, Esq.		
-		Name of Contact Person	1
	Rubin & Rubin,	P.A.	
-	•	Firm/ Company	
	PO Box 550-73	7	
-		Address	
,	Jacksonville, Fl	orida 32255	
-		City/ State and Zip Cod	c
mR	ubin@Rubinan	dBubin.com	
		sed for future annual report	notitication)
		•	
For further information	concerning this matter, please	se call:	
IM Rubin		_{at (} 904	, 396-7711
Name o	i Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	urunent of State:
■ \$35 Filing Foe	□\$43.75 Filing Fee &	□\$43.75 Filing Fec &	□\$52.50 Filing Fee
•	Certificate of Status	Certified Copy	Certificate of Status
		(Additional copy is	Certified Copy
		enclosed)	(Additional Copy is enclosed)
		.	
	ing Address		Address Iment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassen, FL 32314

Amendment Section
Division of Corporations
Clifton Hullding
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

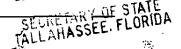
FILED.

2014 DEC 30 PM 3: 46

PEO Professionals, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P01000010164



(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: Pride Risk Solutions, Inc. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Carp.," "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 Flurida, 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 Office Address: Plorida !Zip Code! (City)

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.

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 officeridirector 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 Don: is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones loaves the corporation, Sally Smith is named the V and S. These should be noted as John Doc. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X.Change	<u>PT</u>	John De	OE .	
X Remove	¥	Mike Jo	nnes .	
_X Add	<u>sv</u>	Sally Sr	<u>mith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change				
Add Remove				
2) Change		-		
. Remove				
3) Change		-		/ · · ·
Remove				***
4) Lange Add		-		
Remove				<u>4m</u>
5) Change Add		_		
Remove				
6) Chenge Add		-	***************************************	
Remove				

amendment provides for an exchange, reclassification, or cancellation of issued shares, risions for implementing the amendment if not contained in the attendment itself: (if not applicable, indicate N/A)	ach <i>odditional sh</i>	ing additional Artic seets, if necessary).	(Be specific)	SIBLINET C.		
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visions for implementing the amendment if not contained in the appendment itself:						
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			<u> </u>			
		- 4.1				
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dute this document was signed.	eption:	if other than the
Effective date (f applicable:		
	(no more than 90 days after umendment file date)	****
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(x) was/were ado by the shareholders was/were sui	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east t	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
l'he amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted.	nted by the incorporators without shurcholder action and shareholder	
Dated December	er 23, 2014	
Signature (Ry a di selected		-
-	TimoTHY michael Rosier (Typed or printed name of person signing)	-
_	CFO (Title of person signing)	_
	(Title of person signing)	