# P01000062565

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# MICHAEL L. BREWER

Attorney at Law 500 Canal Street, New Smyrna Beach, Florida 32168 (386) 423-5504

Telecopier: (386) 423-8370

October 5, 2004

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

RE: MORSE ENTERPRISES, INC.

Dear Sir or Madam:

Please find enclosed for filing an Amendment to Articles of Incorporation for the above referenced corporation. Also enclosed is a check made payable to the Department of State in the amount of Thirty-Five and 00/100's (\$35.00) Dollars for the filing fee.

Should you have any questions, please feel free to call.

Sincerely,

Michael L. Brewer, Esq.

MLB/mlv Enclosure

### AMENDMENT

<u>TO</u>

# ARTICLES OF INCORPORATION

04 OCT -7 PM 2:39 SECRETARY OF STATE TALLAHASSEE, FLORIDA

OF

## MORSE ENTERPRISES, INC.

Pursuant to the provisions of Section 607.1006, Florida Statutes, MORSE ENTERPRISES, INC., a Florida corporation, hereby adopts the following amendments to its Articles of Incorporation which were filed on June 22, 2001, Document Number P01000062565, as of this date:

- 1. Article I is amended by changing the corporation's name from MORSE ENTERPRISES, INC., to ScopePlus+ Labs, Inc.
- 2. Article II is amended by changing the principal office address from 1510 Industrial Drive, New Smyrna Beach, Florida 32168 to 50 Faulkner Street, New Smyrna Beach, Florida 32168. The registered agent shall remain the same, MARK E. MORSE
- 3. Article III is amended by changing the registered office address from 1510 Industrial Drive, New Smyrna Beach, Florida 32168 to 50 Faulkner Street, New Smyrna Beach, Florida 32168.

These Amendments to Articles of Incorporation were unanimously approved by the Director and Shareholder of this Corporation on \_ October 5, 2004 .

IN WITNESS WHEREOF, the undersigned sole officer and Director has executed these Articles of Incorporation this 5% day of October, 2004.

MARKE MORSE

STATE OF FLORIDA COUNTY OF VOLUSIA

Michelle L. Vaneancker
MY COMMISSION # DD050958 EXPIRES
October 31, 2005
SONDED THRU TROY FAIN INSURANCE, INC.

Notary Public, State of Florida My commission expires:

[] Personally Known OR

Produced Identification
Type: <u>driver's license</u>