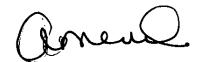
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SUNTEL,	, INC.	8
DOCUMENT NUMBER: P0200002	28453	i
The enclosed Articles of Amendment and fee	e are submitted for filing.	
Please return all correspondence concerning t	this matter to the following:	
	OMAS W. RUGGLES	
(Nam	ne of Contact Person)	
	OMAS W. RUGGLES, P.A.	
(J ,	Firm/ Company)	
603	3 Indian Rocks Road	
·	(Address)	
	Belleair, FL 33756 / State and Zip Code)	
For further information concerning this matte	•	
Thomas W. Ruggles	at (727) 449-2500	
(Name of Contact Person)	at (727) 449-2500 (Area Code & Daytime Telephone Number))
Enclosed is a check for the following amount	made payable to the Florida Department of State:	·
▼\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Certified Copy Certificate of Certified Copy (Additional copy is enclosed) (Additional is enclosed)	of Status ppy 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	

Articles of Amendment to Articles of Incorporation of

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/ h .	of	411011	2008 DEC 22 PM :3: 0
	SUNTEL INC.		TALLAHAS OF STATE
(Name of Corporation as cu	irrently filed with th	e Florida Dept.	of State)
	02000028453	401	
(Document N	Number of Corporatio	n (if known)	
Pursuant to the provisions of section 607. following amendment(s) to its Articles of In	•	s, this <i>Florida F</i>	Profit Corporation adopts the
A. If amending name, enter the new nam	e of the corporation	<u>L</u>	
The new name must be distinguishable "incorporated" or the abbreviation "Corp" (Co". A professional corporation nassociation," or the abbreviation "P.A."	o.," "Inc.," or Co.,	' or the designat	tion "Corp," "Inc," or
B. Enter new principal office address, if a (Principal office address MUST BE A STR			
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF			
	-		
D. If amending the registered agent and/onew registered agent and/or the new r			a, enter the name of the
Name of New Registered Agent:			
New Registered Office Address:	(Florid	a street address)	
			, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if chan I hereby accept the appointment as registed position.			accept the obligations of the
-	Signature of New F	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)

Title Address **Type of Action** Name PDT\$ HARISH PATEL 5649 - 49TH STREET NO. ☐ Add ST. PETERSBURG, FL Remove 33709____ ☐ Remove Add Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

Th	e date of each amendmen	t(s) adoption: 18 DECEMBER 2008			
Effective date if applicable:		IMMEDIATELY			
	:	(no more than 90 days after amendment file date)			
Ad	option of Amendment(s)	(CHECK ONE)			
X		ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.			
	The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):				
	"The number of votes	cast for the amendment(s) was/were sufficient for approval			
	by	(voting group)			
	·	(voting group)			
	action was not required.	ere adopted by the board of directors without shareholder action and shareholder			
	The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder			
	Dated	Homa Patel.			
	Signature (By	a director, president or other officer – if directors or officers have not been			
		ected, by an incorporator – if in the hands of a receiver, trustee, or other court			
	арр	pointed fiduciary by that fiduciary)			
		HEMA PATEL			
		(Typed or printed name of person signing)			
		DIRECTOR, PRESIDENT, SECRETARY AND TREASURER			
		(Title of person signing)			