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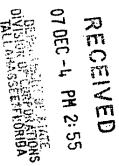
(Re	questor's Name)	
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SECRETARY OF STATE
ALLAHASSEF, FLORIDA

Name Ong Domend Spin 12/4

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:	Services, In	1C · .
DOCUMENT NUMBER: P0700	00 92823	
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
(Name of C	Contact Person)	 ,
(Firm/	Company)	
387 Woodvill	ddress)	
Crawfordulle, (City/ State	F L 32327 and Zip Code)	
For further information concerning this matter, ple		
	at () (Area Code & Daytime T	
(Name of Contact Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for the following amount:		
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations	Street Address Amendment Section Division of Corporations	

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment

Articles of Incorporation

SRAY Secures, Inc.

(Name of corporation as currently filed with the Florida Dept. of State) TALLAHASSEE, FLORIDA

P.O. 2 DOOO 92823
(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:

NEW CORPO	<u>DRATE NAME (i</u>	if changing):			
	GRAY	Services	I.	Ivc.	
(Must contain the (A professional co	word "corporation,"	"company," or "incorp	orated" or	the abbreviation "Corp.," "Inc sional association," or the abbre	," or "Co.") eviation "P.A.")
AMENDMEN and/or Article	TS ADOPTED- Title(s) being ame	(OTHER THAN ended, added or del	NAME (eted: (<u>B</u>	CHANGE) Indicate Artic <u>E SPECIFIC</u>)	le Number(s)
					
					
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
			· 		
		····			
		(Attach additional	pages if n	ecessary)	
				cancellation of issued sha endment itself: (if not applie	
		,			
-			· · · · · ·		

(continued)

The date o	of each amendment(s) adoption: 12-4-07
Effective d	late if applicable; (no more than 90 days after amendment file date)
	(no more than 90 days after amendment the date)
Adoption o	of Amendment(s) (<u>CHECK ONE</u>)
	The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were 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)
	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
	The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
	Signature (By a director, president or other officer if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed of printed name of person signing)
	PRES.
	(Title of person signing)

FILING FEE: \$35