Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : SIEGELAUB, GOLDING, & FELLER, P.A.

Account Number : I19990000058 Phone : (954)753-2222 : (954)753-1123 Fax Number

\*\*Enter the email address for this business entity to be used for Future R annual report mailings. Enter only one conditions annual report mailings. Enter only one email address please.

## COR AMND/RESTATE/CORRECT OR O/D RESIGN PC USA COMPUTER SOLUTIONS PROVIDERS, INC.

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12-07-'09 16:15 FROM-SIEGELAUB PA,				P002/004 F-885
HUY UU	Articles of Ame		F	ILED
•	to			
	Articles of Incor of	poration	2009 DEC	-7 AH 10: 24
PC USA Computer	r Solutions Pr	oviders, Inc.	SEGRET	ARY OF STATE SSEENFLORIDA
(Name of Corporation as curre			f State)	SSEERFLORIDI
P <u>03</u>	000053156			
(Document Num	ber of Corporation	ı (if known)	.,,,	
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	5, Florida Statutes	, this <i>Florida Pro</i>	ofit Corporation ac	lopts the following
A. If amending name, enter the new name of	the corporation:			
				The new
abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro, B. Enter new principal office address, if app (Principal office address MUST BE A STREE)	fessional associati licable:	on," or the abbre	viation "P.A."	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		A - A - A - A - A - A - A - A - A - A -		_ _ _
D. If amending the registered agent and/or r new registered agent and/or the new regis			enter the name of	<u>the</u>
Name of New Registered Agent:		. =		
New Registered Office Address:	(Florida	street address)	prof. 156	
•	(City)	<del> </del>	, Florida, (Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered as			the obligations of i	he position.

Page 1 of 3

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)

Title	<u>Name</u>	Address	Type of Action
<u> </u>	Keren Pinhasi	2564 N.E. Miami Gardens Dr. Miami Gardens, Fl. 33180	Add  Remove
			Add Remove
	tional sheets, if necessary). (Be specifi		
		**************************************	
provisions	adment provides for an exchange, recla for implementing the amendment if na applicable, indicate N/A)	assification, or cancellation of iss ot contained in the amendment i	ned shares, tself:
•			

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## 12-07-'09 16:15 FROM-SIEGELAUB PA, INC. 9547531123 T-781 P004/004 F-885

The date of each amend	ment(s) adoption: 12/7/09
	(date of adoption is required)
Effective date <u>if applica</u>	(no more than 90 days after amendment file date)
Adoption of Amendmen	et(s) (CHECK ONE)
	us/were adopted by the shareholders. The number of votes cast for the amendment(s) as/were sufficient for approval.
	valuese approved by the chareholders through voting groups. The following statement order for each voting group entitled to vote separately on the amendment(s):
"The number of v	votes cust for the amendment(s) was/were sufficient for approval
by	1)
	(voting group)
sction was not require  The amendment(s) wa	s/were adopted by the incorporators without shareholder aution and shareholder
action was not require	d.
Dated	12/7/09
,	
۵: <sub></sub>	
Signatu	(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)
	Zohar Pinhasi
•	(Typed or printed name of person signing)
	President
	(Title of person signing)

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