P03000153598

(Re	equestor's Name)	
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Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE ET OBE

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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of C	Corporations		
NAME OF COR	PORATION:/ 5	Consinental of	DACK, INC
DOCUMENT NU	JMBER:	P\$3000 153598	
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	is matter to the following:	
		lame of Contact Person	
	SENTLIX,	Firm/ Company	
	•	Firm/ Company	
	5353 N. A	Fed Hovey # 3	204
		Address	
	Ft Laure	acke F1 333 ity/ State and Zip Code	308_
		A for-future annual report notification)	
	E-mail address: (to be use	d for future annual report notification)	
For further inform	ation concerning this matter,	please call:	
Mame	MONU MARTS	at (<u>954)</u> <u>816-</u> Area Code & Daytime Te	9921 lephone Number
Enclosed is a chec	k for the following amount m	nade payable to the Florida Depar	tment of State:
\$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 A Amendmer		Street Address Amendment Section	

Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301



April 20, 2010

RAYMOND MOATZ 5353 N. FED HWY #204 FT. LAUDERDALE, FL 33308

SUBJECT: SENTRIX, INC. Ref. Number: P03000153598

We have received your document for SENTRIX, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L04000008541.

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 710A00009668

Articles of Amendment

to Articles of Incorporation of

SENTRIX, INC
(Name of Corporation as currently filed with the Florida Dept. of State)
1
Document Number of Corporation (if known)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "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. Francisco de Standard & Compliante San San Fed Hint The 2018
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Ft lawleydd 1933
It lawderdede 14 205
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 Florida, enter the name of the
new registered agent and/or the new registered office address:
Name of New Registered Agent: Laynus Mostz
Name of New Registered Agent.
5353 N. Feel Huy #24
New Registered Office Address: (Florida street address)
Flo LAucherd 1 37 Totala
(City) (Zip Code)
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.
May IM
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 1025	Raymond Moss	Address 5353 N. Fed Hug FL CANDLOLL, FI 33368	Type of Action Add Remove Add Add
			Remove Add Remove
	ling or adding additional Articles, ente Iditional sheets, if necessary). (Be spec		
	nendment provides for an exchange, re		
provisio	ons for implementing the amendment in ot applicable, indicate N/A)		

The date-of each amendment	t(s) adoption: 4.24.20V (date of adoption is required)
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement 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)
	(voung group)
The amendment(s) was/we action was not required.	re 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	lov 24 20100
Signature <u>/</u>	
. (Ву	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 pointed fiduciary by that fiduciary)
арр	officed fiduciary by that fiduciary)
	A AYMONO L MOSTS
	(Typed or printed name of person signing)
	- Treside
•	(Title of nerson signing)