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FILED 17 OCT -2 AMIL: 15

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	AATION: IT Pros Plus, Inc.						
DOCUMENT NUME	BER:						
The enclosed Articles	of Amendment and fee are su	bmitted for filing.					
Please return all corres	pondence concerning this ma	tter to the following	g:				
	John A. Deskovitz						
	Name of Contact Person						
	IT Pros Plus, Inc.						
		Firm/ Com	pany	· · · · · · · · · · · · · · · · · · ·			
	P.O. Box 2257						
		Addres	S				
	Venice, FL 34284-2257						
	City/ State and Zip Code						
For further information	n concerning this matter, pleas	se call:					
John A. Deskovitz		at (	941	993-0497			
Name o		Area Co	de & Daytime Telephone Number				
Enclosed is a check for	r the following amount made	payable to the Flori	ida Depa	rtment of State:			
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Copy (Additional copenclosed)	y	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Amend Division Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301			

## Articles of Amendment to Articles of Incorporation of

## FILED 17 OCT -2 AHII: 15

PASCONIAN OF SIMILE TABLAHASSEE FEBRIDA

IT Pros Plus, Inc (Name of Corporation as currently filed with the Florida Dept. of State) PO4000054811 (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: 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 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." 5090 Central Sarasota Pkwy B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Apt 5307 Sarasota, FL 34238 C. Enter new mailing address, if applicable: P.O. Box 2257 (Mailing address MAY BE A POST OFFICE BOX) Venice, FL 34284-2257 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: John A. Deskovitz Name of New Registered Agent 5090 Central Sarasota Pkwy Apt 5307 (Florida street address) Sarasota Florida New Registered Office Address: (City) 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.

Page 1 of 4

ggistered 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)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	Julia A Schreuder	11771 Breadfruit Lane
Add			Venice, FL 34292
X Remove			
2) Change	Р	John A Deskovitz	5090 Central Sarasota Pkwy
Add			Apt 5307
Remove			Sarasota, FL 34238
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<del></del>		
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)
Julia A Schreuder of 11771 Breadfruit Lane, Venice FL 34292
has exchanged 100% of her IT Pros Plus, Inc. shares for the total sum of \$10.00.
John A Deskovitz of 5090 Central Sarasota Pkwy Apt 5307, Sarasota FL 34238
has exchanged \$10.00 for 100% of IT Pros Pius, Inc. shares.
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)
<u> </u>

· · · · •	09/30/2017	
The date of each amendment(s) ad	option:	, if other than
date this document was signed.	30/2017	
Effective date <u>if applicable</u> :		
	(no more than 90 da	ays after amendment file date)
Note: If the date inserted in this be document's effective date on the De		e statutory filing requirements, this date will not be listed as
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado by the shareholders was/were su		mber of votes cast for the amendment(s)
		n voting groups. The following statement e separately on the amendment(s):
"The number of votes cast	for-the amendment(s) was/were su	ifficient for approval
by	(voting group)	"
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors with	hout shareholder action and shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without	shareholder action and shareholder
09/30/201	7	
Dated	0 · · · · · · ·	
1	( d/hlact	
Signature O	The court of the c	- if directors or officers have not been
		ands of a receiver, trustee, or other court
	ed fiduciary by that fiduciary)	nus of a receiver, musice, or outer court
	John A. Des	skovita
	(Typed or printed nam	
	President	
	(Title of p	erson signing)