P04000078699

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
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SECRETARY OF STATE

Carlo

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION:	DUTTAKAVI, INC.	
DOCUMENT NU	MBER:	P04000076699	
The enclosed Artic	<i>les of Amendment</i> and i	ee are submitted for filing.	
Please return all co	rrespondence concerning	g this matter to the following:	
	SRII	DHAR DITTAKAVI	
	(N	ame of Contact Person)	
<u> </u>	·····	(Firm/ Company)	
	1301	0 NW 1st, STREET , SUITE 308	
		(Address)	 .
<u></u>		IBROKE PINES FL 33028	· · · · · · · · · · · · · · · · · · ·
For further informa	Cit ation concerning this mat	ty/ State/ and Zip Code) tter, please call:	
SRIDH	AR DITTAKAVI	at (919) 656-2519	
(Name of Contact Person)		(Area Code & Daytime T	elephone Number)
Enclosed is a chec	k for the following amou	nt:	
☑ \$35 Filing Fee	□ \$43.75 Filing Pee & 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 P.O. Box 6327 Tailabassee, FL 32314		Street Address Amendment Section Division of Corpora 409 E. Gaines Street Tallahassee, FI 323	tions t

Articles of Amendment	
to	. 0
Articles of Incorporation	5
01	益品
DITTAKAVI, INC.	₹ 82 20
(Name of corporation as currently filed with the Florida Dept. of State)	5 -
וד רד	10 7
P04000078699	F S7
(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:	75-
NEW CORPORATE NAME (if changing):	
WBI WIZARDS, INC.	
Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")	
AMENDMENTS ADOPTED - (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	
(Attach additional pages if necessary)	
If an amendment provides for 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	
(continued)	

The date of each amendment(s)	adoption: 02-01-2005
Effective date if applicable:	
(1	no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	as/were approved by the shareholders. The number of votes cast for the shareholders was/were sufficient for approval.
	as/were approved by the shareholders through voting groups. The nust be separately provided for each voting group entitled to vote endment(s):
"The number of ve	otes cast for the amendment(s) was/were sufficient for approval by
<u> </u>	(voting group)
The amendment(s) wa and shareholder action	as/were adopted by the board of directors without shareholder action n was not required.
The amendment(s) was shareholder action was	as/were adopted by the incorporators without shareholder action and a not required.
Signed this 1st day of FE	EBRUARY 2005
Signature	JAA.
selected	ector, president or other officer - if directors or officers have not been by an incorporator - if in the hands of a receiver, trustee, or other court and fiduciary by that fiduciary)
	SRIDHAR DITTAKAVI
),	(Typed or printed name of person signing)
	PRESIDENT
****	(Title of person signing)

FILING FEE: \$35