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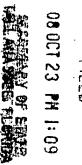
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Travis Con	sulting, Inc.	
DOCUMENT NUM	iber: <u>P04000143678</u>	3	
The enclosed Article	es of Amendment and fee a	re submitted for filing.	
Please return all corr	respondence concerning thi	s matter to the following	<u>;</u>
		II L. Cheatham, III of Contact Person)	
	(14ame C	or Contact Lesson)	
		Cheatham, III, P.A.	
 		tral Avenue, Suite A	
		burg, Florida 33711 tate and Zip Code)	<u></u>
For further informati	on concerning this matter,	• ,	
Russell L. Cheath	am, III of Contact Person)		28-3600 Daytime Telephone Number)
Enclosed is a check	for the following amount m	nade payable to the Flori	da Department of State:
☑\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Add Amendment Division of O P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address Amendment Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	ations nter Circle

Articles of Amendment to Articles of Incorporation of

Travis Consulting, In-	c.		ယ
(Name of Corporation as currently filed with t		14 g	3
P04000143678			
(Document Number of Corporati	on (if known)	36	60:1
Pursuant to the provisions of section 607.1006, Florida Statut following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation	-	on adopts	the
The new name must be distinguishable and contain the "incorporated" or the abbreviation "Corp.," "Inc.," or Co., "Co". A professional corporation name must contain association," or the abbreviation "P.A."	" or the designation "Corp," "I	nc," or	
B. Enter new principal office address, if applicable:	6970 - 12th Terrace North		
Principal office address <u>MUST BE A STREET ADDRESS</u>)	St. Petersburg, Florida 337	10	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6970 - 12th Terrace North		
	St. Petersburg, Florida 3371	10	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add		ne of the	
Name of New Registered Agent:			
New Registered Office Address: (Florida)	da street address)		
	, Florida		
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am position.		ŕ	the
Signature of New	Registered Agent, if changing		

<u>Title</u>	<u>Name</u>	Address	Type of Action
P&D	Howard Travis	6970 - 12th Terrace North St. Petersburg, FL 33710	
P&D_	Debra Travis	6970 - 12th Terrace North St. Petersburg, FL 33710	
			Add Remove
F. If an a	mendment provides for an exchang	e. reclassification, or cancellation of iss	ned shares.
<u>provisi</u>		te, reclassification, or cancellation of issent if not contained in the amendment i	
<u>provisi</u>	ons for implementing the amendme		

inho to 8
The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes east for the amendment(s) was/were sufficient for approval
by" (voting group)
(voling group)
The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated Oct 20, 2008
Signature Luka francis
(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)
Debra Travis
(Typed or printed name of person signing)
President & Director
(Title of person signing)