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SECRETARY OF SIA

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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORE | PORATION: | Holores Data Systems, In | C. |
|----------------------|--|---|----------------|
| DOCUMENT NU | MBER: | P05000000560 | |
| The enclosed Artic | eles of Amendment and fee a | re submitted for filing. | |
| Please return all co | orrespondence concerning thi | is matter to the following: | |
| | | John N. Gonzalez | |
| | N | lame of Contact Person | |
| | Holores Data Systems, Inc. | | |
| | Firm/ Company | | |
| | 1426 SW Osprey Cove | | |
| | Address | | |
| | Port St. Lucie, FL 34986 | | |
| | C | ity/ State and Zip Code | |
| | john@ho E-mail address: (to be use | oloresdatasys.com d for future annual report notification) | |
| For further informa | ation concerning this matter, | please call: | |
| Jo | ohn N. Gonzalez | _ at (| 3-0450 |
| Name | of Contact Person | Area Code & Daytime Telep | phone Number |
| Enclosed is a chec | k for the following amount n | nade payable to the Florida Departn | nent of State: |
| \$35 Filing Fee | ☐ \$43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | |
| P.O. Box 6 | nt Section Corporations | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle | |

Tallahassee, FL 32301



June 17, 2011

JOHN N. GONZALEZ HOLORES DATA SYSTEMS, INC. 1426 SW OSPREY COVE PORT ST. LUCIE, FL 34986

SUBJECT: HOLORES DATA SYSTEMS, INC.

Ref. Number: P05000000560

We have received your document for HOLORES DATA SYSTEMS, INC. and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(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 P95000079791 - WEB WIZARD, INC.

The date of adoption of each amendment must be included in the document.

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) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 211A00014814

Articles of Amendment

to

Articles of Incorporation of 1

FILED

| | ata Systems, Inc. | 11 JUN 27 PM 1: 29 |
|---|---|----------------------------------|
| (Name of Corporation as curre | ently filed with the Florida Dept. of Stat | SECRETARY OF STATE |
| P0500000560 | | TALLAHASSEE FLORIDA |
| (Document Num | aber of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006 mendment(s) to its Articles of Incorporation: | 5, Florida Statutes, this <i>Florida Profit C</i> | Corporation adopts the following |
| . If amending name, enter the new name of | the corporation: | |
| System D | esign Wizards, Inc. | The new |
| ame must be distinguishable and contain t bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered." "proj | designation "Corp," "Inc," or "Co". A | 1 professional corporation |
| . Enter new principal office address, if app Principal office address <u>MUST BE A STREE</u> | | |
| . Enter new mailing address, if applicable: | | |
| (Mailing address <u>MAY BE A POST OFFIC</u> | <u>CE BOX</u>) | |
| . If amending the registered agent and/or renew registered agent and/or the new regis | egistered office address in Florida, ente | er the name of the |
| | | |
| Name of New Registered Agent: | | - |
| Name of New Registered Agent: New Registered Office Address: | (Florida street address) | - |
| | (Florida street address) | , Florida |

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) **T**itle **Name** Address **Type of Action** ☐ Add ☐ Remove ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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)

| The date of each amendmen | t(s) adoption: June 22, 2011 |
|---|---|
| | (date of adoption is required) |
| Effective date if applicable: | |
| , b | (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 | re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval. |
| | re approved by the shareholders through voting groups. The following statement d 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 | |
| <u> </u> | (voting 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. | re adopted by the incorporators without shareholder action and shareholder |
| Dated_June | 22, 2011 |
| Signature | 2011 Del |
| | a director, president on other officer - if directors or officers have not been |
| | ected, by an incorporator – if in the hands of a receiver, trustee, or other court |
| арр | ointed fiduciary by that fiduciary) |
| | John N. Gonzalez |
| | (Typed or printed name of person signing) |
| | President |
| | (Title of person signing) |
| | (or person signing) |