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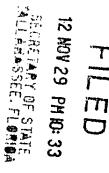
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: Highpoint	Technology Sol	utions, Inc.	
DOCUMENT NUMBE	R:P060000	32241		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ondence concerning this ma	tter to the following:		
	Mark D. Hobs			
		Name of Contact Person	1	
	Devine Goodman	Rasco & Wells,	P.A.	
_		Firm/ Company		
	777 Bri	ckell Avenue, S	Suite 850	
		Address		
_	Miami, Flori			
		City/ State and Zip Code	C	
	E-mail address: (to be us	on@devinegoodma ed for future annual report	notification)	
			,	
Confumbacioformation of		16.		
TOF THE HELD HINDERHALLON C	oncerning this matter, pleas	e can:		
Mark D. H	obson, Esq.	at ( <u>305</u>	_) <u>374-8200</u>	
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the	he following amount made p	payable to the Florida Depa	irtment of State:	
S35 Filing Fee	<b>5</b>	<b>—</b>	_	
333 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee &	□\$52.50 Filing Fee	
	Centificate of Status	Certified Copy (Additional copy is	Certificate of Status Certified Copy	
		enclosed)	(Additional Copy	
		,	is enclosed)	
<b>4.€</b> 414		,		
Mailing Address  Amendment Section  Division of Corporations			Address ment Section	
		Amendment Section Division of Corporations		
	ox 6327	Clifton Building		
Tallaha	assee, FL 32314		xecutive Center Circle	
		Tallaha	issee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

Highpoint Technology Soluti	ons, Inc.
(Name of Corporation as currently filed with the Flori	
P06000032241	
(Document Number of Corporation (if known	own)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	ida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	•
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co" word "chartered," "professional association," or the abbreviation "P.A.	. A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
-	
***	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
_	
_	······································
<ul> <li>If amending the registered agent and/or registered office address new registered agent and/or the new registered office address;</li> </ul>	in Florida, enter the name of the
• • • • • • • • • • • • • • • • • • •	
Name of New Registered Agent	**************************************
(l' lorida street a	ddressi
New Registered Office Address:(City)	Florida
Many Bandana I A. at Eliana I A. at	<b>₹</b>
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 29
Signature of New Registered Ager	t if abancing

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; CFO 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.

X Change	PT John Doc  V Mike Jones  SV Sally Smith		
X Remove			
X Add			
Type of Action (Check One)	Title Name	<u>Addres</u> s	
1) Change	C Albuerne	, Mario R 16445 SW 31StStreet	•
Add		Miramar, FL 33027	
_x_ Remove			
2) Change	C Peres, J	Tose M 2411 Tigertail Ave	
Add		Miami, FL 33133	
X_ Remove			,
3) X Change	D,P,S Amalor,	George 651 SW 113th Way	,
Add		Pembroke Pines, FL	33025
Remove			
4) Change			
Add			
Remove			,
5) Change			ı
Add		*	
Remove			
6) Change	-		
Add			
Remove			

Attac	rending or adding addition th additional sheets, if neces	isary). (Be spe	cific)	<del></del>		
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prov	amendment provides for a visions for implementing t (if not applicable, indicate	<u>he amendment i</u>	dassification, or f not contained	r cancellation of in the amendmen	issued shares, at itself:	
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The date of each amendment(s) adoption: NOVEMBER 25, 2012
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(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated NOVEMBER 25, 2012
(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)  CEORNE AMALOR
(Typed or printed name of person signing)
SOLE SHARFHOLDER
(Title of person signing)