Florida Department of State

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Division of Corporations

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Account Number : I20070000020 Phone

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COR AMND/RESTATE/CORRECT OR O/D RESIGN

ARDUOSDATA SOLUTIONS, INC.

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8/3/2009

Articles of Amendment

to				
Articles of Inc of	orporation			
ARDUOSDATA SOLUTIONS, INC.				
(Name of Corporation as currently filed with the Florida Dept. of State)				
and the second s	PD70000 11295			
(Document Number of Corporate	ion (if known)			
Pursuant to the provisions of section 607.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following			
A. If amending name, enter the new name of the corporation	n:			
	The new			
name must be distinguishable and contain the word "corp abbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "prefessional associations of the contain the word "chartered,"	orp," "Inc," or "Co". A professional corporation			
B. Enter new principal office address, if applicable:	1844 N. NOB HILL RD.			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	STE, 403			
	PLANTATION, FL 33322			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1844 N. NOB HILL RD.			
	STE. 403			
•	PLANTATION, FL 33322			
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	address in Florida, enter the name of the dress:			
Name of New Registered Agent:				
New Registered Office Address: (Flor	ida street address)			
	, Florida			
(City)	(Zip Code)			
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	gent; iliar with and accept the obligations of the position.			
Signature of New	Registered Agent, if changing			

Page 1 of 3



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)

Title	Name	Address	Type of Action		
DPST	MARIANELLA LEON	12000 N. DALE MABRY HWY STE 110 TAMPA, FL 33618	☐ Add ☐ Remove		
DPST	HENRY SOUSSAN	1844 N. NOB HILL RD. STF 403 PLANTATION, FL 33322	☐ Remove		
	· .				
E. If amendin	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)					
	——————————————————————————————————————	· · · · · · · · · · · · · · · · · · ·	 /		
	· ·				
-			<u> </u>		

The date of each amendment	(s) adoption; 7/30/09
,	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
The amendment(s) was/wer must be separately provided	re approved by the shareholders through voting groups. The following statement of 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)
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated_7/30/	2009
Signature	Moundle Dear.
selec	a difector, president or other officer — if directors or officers have not been cted, by an incorporator — if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)
	MARIANELLA LEON
	(Typed or printed name of person signing)
	PRESIDENT, DIRECTOR
·	(Title of person signing)