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COR AMND/RESTATE/CORRECT OR O/D RESIGN

INTEGRATED BIOMETRIC SECURITY SOLUTIONS CORP

Certificate of Status	0
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FAX AUDIT NUMBER:

H090000124193

Articles of Amendment
to
Articles of Incorporation
of

INTEGRATED BIOMETRIC SECURITY SOLUTIONS CORP
(Name of corporation as currently filed with the Florida Dept. of State)

P07000065174

(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:

NEW CORPORATE NAME (if changing):D & B GLOBAL RELATIONS AND COMMODITIES CONSULTANTS INC

(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

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)

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FAX AUDIT NUMBER: 4090000124193The date of each amendment(s) adoption: 01-19-09Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were approved 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.

Signed this 19TH day of JANUARY, 2009.

Signature _____

(Signature)

BRIAN ZIRULNIKOFF

(Typed or printed name of person signing)

TREASURER/DIRECTOR

(Title of person signing)

FAX AUDIT NUMBER: 4090000124193