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(Requestor's Name)		
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(Address)		
(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(D.:		
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(Document Number)		
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: TOtal Computer lechnical Orvices
DOCUMENT NUMBER: \$\frac{907006106763}{}
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Adam D'Alena (Name of Contact Person)
Tri County Techical Services
4095 State Rd 7 L104 (Address)
Wellington, FL 33449 (City/ State and Zip Code)
For further information concerning this matter, please call:
Adam D'Alena at (561) 779-1097 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

Total Computer	Technical Services, Inc
(Name of Corporation as currently filed wit	
PATMAIN	しゅろ
(Document Number of Corpor	ration (if known)
(Document Number of Corpor	
Pursuant to the provisions of section 607.1006, Florida Sta following amendment(s) to its Articles of Incorporation:	tutes, this Florida Profit Corporation afforts the
A. If amending name, enter the new name of the corporat	ion:
TRI COUNTY Technic	Cal Services Har I
The new name must be distinguishable and contain t	
"incorporated" or the abbreviation "Corp.," "Inc.," or C	Co.," or the designation "Corp," "Ino pr 🥯
"Co". A professional corporation name must conta association," or the abbreviation "P.A."	in the word "chartered," "profes. And 🞖
association, or the abbreviation 1.A.	IME CITY DIM
B. Enter new principal office address, if applicable:	4049 510te Ka'1
(Principal office address <u>MUST BE A STREET ADDRESS</u>	'Suite LID4
	Wellington FL 33449
	Willing Toll, FL 3011.
C. Enter new mailing address, if applicable:	100= (1.1. 1) - 7 - 7
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	4045 State 120 1
	Suite 1:104
	10011,00 to 11 33449
	Walling lan, FL 33 11.
D. If amending the registered agent and/or registered offi	ce address in Florida, enter the name of the
new registered agent and/or the new registered office a	address:
Name of New Registered Agent:	m D'Alena
14706	State Dd 7 Suite 6104
New Registered Office Address: (Flo	prida street address)
14(6)/	77.110
VICITI	1010n, Florida 33449 (City) (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	
I hereby accept the appointment as registered agent. I as	m tamiliar with and accept the obligations of the

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

The date of each amendment(s) adoption: 19/01/2008
Effective date if applicable: 12/01/2008
(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 statemen 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
Signature (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)
(Typed or printed name of person signing)
CEO President (Title of person signing)