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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: MAFRAK SYSTE	EMS INC	
DOCUMENT NUMBI	P0700012.1810	·	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
3	MARX F. SACRISTAN-MA	ALDONADO	
_		Name of Contact Person	<u> </u>
2	MAFRAK SYSTEMS INC		
_		Firm/ Company	-
!	120 PARKSIDE GREEN D	PR. B	
-		Address	
(GREENACRES, FL 33415		
_		City/ State and Zip Cod	e
mary@	mafrak.com		
		sed for future annual report	notification)
For further information MARX F. SACRISTAI	concerning this matter, pleas	561	294-8149
Name of	Contact Person	at (at Co	de & Daytime Telephone Number
	the following amount made		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle ussee, FL 32301

Articles of Amendment to Articles of Incorporation of

MAFRAK SYSTEMS INC (Name of Corporation as currently filed with the Florida Dept. of State) P07000124810 (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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: MARX F. SACRISTAN-MALDONADO Name of New Registered Agent 1120 PARKSIDE GREEN DR. B (Florida street address) GREENACRES New Registered Office Address: (Civ: 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.

w 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)

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; CEO = 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 F. 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change			
Add			
Remove			
2) Change			
Add			-
Remove			
3) Change			- <u>-</u>
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, ij	f necessary). (B	enter change(s) he e specific)			
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	<u>-</u> .	· · · · · · · · · · · · · · · · · · ·			
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f an amendment provide	s for an exchange	, reclassification, e	or cancellation of i	ssued shares,	
provisions for implemen	ting the amendme	ent if not conta <u>ine</u> c	l in the amendmen	t <u>itself:</u>	
(if not applicable, ind	licate N/A)				
<u>.</u>					
.					
<u> </u>					

	05/31/2019	
The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
05/31/	2019	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date	<u>'</u> }
Note: If the date inserted in this blo document's effective date on the Depo	ck does not meet the applicable statutory filing requirement artment of State's records.	its, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopt by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amicient for approval.	nendment(s)
	oved by the shareholders through voting groups. The following the shareholders through voting group entitled to vote separately on the amendme	
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	 (voting group)	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ted by the board of directors without shareholder action and s	shareholder
The amendment(s) was/were adopt action was not required.	red by the incorporators without shareholder action and share	:holder
Dated	6/4/19	
Signature	!	
	1.04/). xtox, president or other officer – if directors or officers have	not been
	by an incorporator – if in the hands of a receiver, trustee, or	
	I fiduciary by that fiduciary)	
N	MARX F. SACRISTAN-MALDONADO	
_	(Typed or printed name of person signing)	
P	RESIDENT	
_	(Title of person signing)	