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COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: D.S.P. LOOP, Inc. DOCUMENT NUMBER: PO80000 6724				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Rodolfo E. Vilanino Name of Contact Person D.S.P. 6100P Firm/Company Conal Way # 127 Address Miami Fl 33155 City/ State and Zip Code dspreach Inc B gmail. com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Rodo) Fo E. Vilanino at 30. 262-6678 Name of Contact Person 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 Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301				

Articles of A	mendment	BWISINI JARVEN
Articles of Inc	•	12 AUG 10 AM 8: 59
D.S.P. Group :	Inc	AM 8: 50
(Name of Corporation as currently filed with the F		
P0800000 672	24	
(Document Number of Corporation (i	f known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation ado	pts the following amendment(s)
A. If amending name, enter the new name of the corporation:		
D.S.P. RESEARCH. In	· C ·	T.I.
D. S. P. RESEARCH, In name must be distinguishable and contain the word "corporatio" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation"	Co". A professional corporati P.A."	on name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	7821 CORAL Suite 12	Nay
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Miami Fl	33155
	7821 CONA SuitE MIGNO FI	33155
D. If amending the registered agent and/or registered office addinew registered agent and/or the new registered office address		of the
Name of New Registered Agent	C/A	
(Florida str	eet address)	
New Registered Office Address: (City)	, Florida	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent		
I hereby accept the appointment as registered agent. I am familiar t		of the position.

to

Signature of New 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 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.

Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name /	<u>Addres</u> s
1) Change		/A	
Add			
2) Change Add			
Remove			
3) Change			
Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			

attach additional sheets, if necessary). (Be specific)	,
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8-8112				
The date of each amendment(s) adoption:				
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 8-8				
Signature (By 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)				
Rodolfo E. Vilanino (Typed or printed name of person signing)				
(Typed or printed name of person signing) President.				
(Title of person signing)				