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S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LAIF	R SERVICES INC		
DOCUMENT NUMBER: P080000	007411		
The enclosed Articles of Amendment	and fee are submitted for	filing.	
Please return all correspondence conc	erning this matter to the fo	ollowing:	
THOMAS RA	AD		
	Name of	Contact Person	
LAIR SERVIC	CES INC		
	Firm	/ Company	
1107 EAST J	ACKSON STREET, SUI	TE 101	
		Address	
TAMPA, FL :	33602		
	City/ Sta	te and Zip Code	
TRAAD@LAIRSEF	RVICES.COM		
E-mail ad	dress: (to be used for futur	e annual report no	tification)
For further information concerning th	is matter, please call:		
THOMAS RAAD		813 at ()	404-2955
Name of Contact Pers			& Daytime Telephone Number
Enclosed is a check for the following	amount made payable to t	he Florida Departi	ment of State:
5	ate of Status Certific	ed Copy onal copy is	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corpora P.O. Box 6327 Tallahassee, Fl. 32	ations	Division of The Center 2415 N.	Idress ent Section of Corporations tre of Tallahassee Monroe Street, Suite 810 ee, FL 32303

Articles of Amendment to Articles of Incorporation of

of	paration.
LAIR SERVICES INC	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P08000007411	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Statutes, the Florid	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
DART TECH TIC	The new
name must be distinguishable and contain the word "corporation," "cor" Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A prehartered," "professional association," or the abbreviation "P.A."	npany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
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 addre	ss in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stree	u address)
New Registered Office Address:	, Florida
(1	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
	19 A
Signature of New Re	gistered Agent, if changing
	26 Z6

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	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			
Adđ			
Remove			
4) Change		_	
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			
		Page 2 of 4	
E. If amending or add (Attach additional sh	ing addit	tional Articles, enter change(s) here: ecessary). (Be specific)	

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F. If an amendment provides for an exchang provisions for implementing the amendment (if not applicable, indicate N/A)	ge, reclassification, or cancellation of issued shares, nent if not contained in the amendment itself:	
		
		
	Page 3 of 4	
The date of each amendment(s) adoption:date this document was signed.		, if other than t
Ellective date it applicable:	(no more than 90 days after amendment file date)	

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes east for the amendment(s) ent for approval.
	d by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):
"The number of votes east for the	ne amendment(s) was/were sufficient for approval
hy	
	(voting group)
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder
Dated	1/19
Signatur	
(By a threets selected, by	or, president or other officer – if directors or officers have not been an incorporator - if in the hands of a receiver, trustee, or other court ductary by that fiduciary)
	Thomas Read (Typed or printed name of person signing)
	(Typed of printed name of person signing)
***************************************	Ourer P
(Titl	le of person signing)