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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:ARO	und The	Horn	CONSULTINO	INC.
DOCUMENT NUMBER: POS	0000	14084	/	
The enclosed Articles of Amendment an	d fee are sub	mitted for	filing.	
Please return all correspondence concern	ing this matt	er to the fo	ollowing:	
ADA	M Ang	EL act Person)		
_ AKOUND THE	Hokk (Firm/Con	Gowsi npany)	NLTING,	INC.
8841 LAKE	PARK (Addre	CIR ss)	N.	
DAVIE FL For further information concerning this re				
ADAM AUBEL (Name of Contact Person)	8	et (<u>954</u> (Area		
Enclosed is a check for the following am \$\sqrt{35}\$ Filing Fee \$\sqrt{343.75}\$ Filing Fee & Certificate of Statu	k []\$43.75 Fili	ng Fee & [opy I copy is	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	A E C 2	lifton Buil 661 Execu	t Section Corporations	

Articles of Amendment ťΩ Articles of Incorporation AROUND THE HORN CONSULTING, (Name of Corporation as currently filed with the Florida Dept. of State) PO8000044084 (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: The new 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: Name of New Registered Agent: New Registered Office Address: (Florida street address) (Zip Code) 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.

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>P5</u>	Adam Aubel	8841 Lake Park Cir N Davie FL 33328	Add Remove
	 		Add Remove
			Add Remove
F. If an are		lessi@eation_eation_eCio	
provision	endment provides for an exchange, recons for implementing the amendment if applicable, indicate N/A)	not contained in the amendment i	ued snares, tself:

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P. 02/03

Oct 22 08 10:49a - Vault Technology Inc.

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The date of each amendment(s) adoption: Effective date if applicable: (no more than 90 days after umendment file dute) 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 satisfied to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval (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)