PO800006835I

Florida Department of State
Division of Corporations
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To:
    Division of Corporations
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From:
    Account Name     : BUSH ROSS, P.A.
    Account Number   : I19990000150
    Phone            : (813)224-9255
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COR AMND/RESTATE/CORRECT OR O/D RESIGN

XML MOBILE, INC.

Certificate of Status	0
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Page Count	04
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10/13/08

FILED

Articles of Amendment
to
Articles of Incorporation
of

2008 OCT 13 PM 2: 32

SECRETARY OF STATE
TALLAHASSEE. FLORIDA

XML Mobile, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

P08000068351
(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)

                _____, Florida_____
                        (City)   *(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

Page 1 of 3

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*)

Title	Name	Address	Type of Action
VP	WALLACK, JOSHUA	899 NE 99 ST MIAMI SHORES FL 33138	☐ Add ☑ Remove .
____	_____	_____	☐ Add ☐ Remove
____	_____	_____	☐ Add ☐ Remove

E. If amending or adding additional Articles, enter change(s) here:
(*attach additional sheets, if necessary*).   (*Be specific*)

_____

_____

_____

_____

_____

_____

_____

_____

F.   If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(*if not applicable, indicate N/A*)

_____

_____

_____

_____

_____

The date of each amendment(s) adoption: __10/10/2008__

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 __10/10/08__

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)

__Adrian S Johnson__
(Typed or printed name of person signing)

__President__
(Title of person signing)