P080000-76946

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SECRETARY OF STATE
SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORI	ORATION: INTEL ONE SERVICES INC.				
DOCUMENT NU	MBER:	P08000076946			
The enclosed Artic	cles of Amendment and fee	are submitted for filing.			
Please return all co	orrespondence concerning th	is matter to the following:			
		Lee Martinez			
		Name of Contact Person			
Firm/ Company					
Four Embarcadero Center, 39th Floor Address					
	1 min	Francisco, CA 94111	, , , , , , , , , , , , , , , , , , , 		
	:	City/ State and Zip Code			
	E-mail address: (to be us	ed for future annual report notification)			
For further inform	ation concerning this matter	, please call:			
	Lee Martinez	at (415) 3 Area Code & Daytime Te	354-0100		
Name of Contact Person		Area Code & Daytime Te	elephone Number		
Enclosed is a chec	k for the following amount	made payable to the Florida Depar	rtment of State:		
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building			

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

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INTEL ONE	SERVICES INC.	2019 950 0	5.
(Name of Corporation as curre	ntly filed with the Florida	2009 SEP -8 Dept. of State	rh 4: 36
P080	000076946	SECRETARY O TALLAHASSEE	FSTATE
	ber of Corporation (if know	vn)	FLORIDA
suant to the provisions of section 607.1006 endment(s) to its Articles of Incorporation:	, Florida Statutes, this <i>Flo</i>	orida Profit Corporation ad	opts the follow
If amending name, enter the new name of	the corporation:		
INTELLIGENCE	E ONE SERVICES INC	· /•	The new
ne must be distinguishable and contain to previation "Corp.," "Inc.," or Co.," or the ne must contain the word "chartered," "prof	designation "Corp," "Inc,	" or "Co". A professional	
Enter new principal office address, if appl	icable:		****
incipal office address <u>MUST BE A STREE</u>	TADDRESS)		

_			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFIC	E BUA)	•	
•			
		·····	
If amending the registered agent and/or r	anistored office address in	Florida anter the name a	fthe
new registered agent and/or the new regis		Piorida, enter the name of	<u>t the</u>
Name of New Registered Agent:		, - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
New Registered Office Address:	(Florida street address)		
		P1:4-	
	(City)	, Florida (Zip Code)	
	(Cily)	(Zip Couc)	
w Registered Agent's Signature, if changing	ig Registered Agent:		
ereby accept the appointment as registered a	gent. I am familiar with a	nd accept the obligations of	the position.
	ionature of New Peristeres	1 Agant if shanging	

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** Address **Name** Type of Action ☐ 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 amendmen	t(s) adoption: <u>08</u>	3/04/2009
Effective date <u>if applicable</u> :	08/06/2009	(date of adoption is required)
	(no more than 9	00 days after amendment file date)
Adoption of Amendment(s)	СН	IECK ONE)
The amendment(s) was/we by the shareholders was/w		shareholders. The number of votes cast for the amendment(s) approval.
		ne shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amen	dment(s) was/were sufficient for approval
by		,,,
•	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the	board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the	incorporators without shareholder action and shareholder
(Dated) 08/0)7/2009	···
Signature <u>(</u>	DUM ?	Sasson
		ient or other officer - if directors or officers have not been
	ected, by an incorpointed fiduciary t	porator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		Lisa Sasson
	(Ty	ped or printed name of person signing)
		P
	(Title o	f person signing)