P090000029285

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	me)
<u>(D</u>	ocument Number)	
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	FDS INTERNATIONAL, I	NC.
DOCUMENT NUM	BER:	P09000029285	
The enclosed Articles	of Amendment and fee	are submitted for filing.	
Please return all corre	spondence concerning th	is matter to the following:	
		TH DAL FARRA, CPA	
	ľ	Name of Contact Person	
		Firm/ Company	
		1465 NW 97 AVE	· · · · ·
		Address	
·		DORAL, FL 33172 City/ State and Zip Code	
	dalfa E-mail address: (to be use	arraj@aol.com ed for future annual report notification)	
For further informatio	n concerning this matter,	please call:	
	OAL FARRA, CPA		91-8787
		Area Code & Daytime Tele	
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status		□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addr Amendment So Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	e



August 15, 2011

JUDITH DAL FARRA, CPA 1465 NW 97 AVE DORAL, FL 33172

SUBJECT: FDS INTERNATIONAL, INC.

Ref. Number: P09000029285

We have received your document for FDS INTERNATIONAL, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

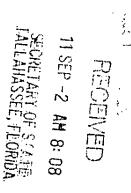
PHOTO COPIES ARE NOT ACCEPTABLE.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 511A00019061



Articles of Amendment to Articles of Incorporation of

FDS INTERNATIONAL, INC.

(Name of Corporation as currently filed with	the Florida Dept. of State)		
P09000029285		•	
(Document Number of Corporat	ion (if known)		
Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:	tes, this Florida Profit Corporation adop	its the t	following
A. If amending name, enter the new name of the corporation	<u>n:</u>		
N/A		The n	iew
name must be distinguishable and contain the word "corp abbreviation "Corp.," "Inc.," or Co.," or the designation "C name must contain the word "chartered," "professional associate. 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)	orp," "Inc," or "Co". A professional co	orporati	SECHE TARY OF STATI
·		-	

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:	N/A	
New Registered Office Address:	(Florida stree	et 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

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:

removed and title, name, and address of e	ach Officer and/or Director being
(Attach additional sheets, if necessary)	ADDITIONAL SHEET FOLLOWS

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>P</u>	OSCAR M NUNEZ	1465 NW 97 AVE DORAL, FL 33172	☐ Add ☑ Remove
<u>VP</u>	DIOLENA M NUNEZ	1465 NW 97 AVE DORAL, FL 33172	☐ Add ☐ ☑ Remove
<u>s</u>	DIOGENES R NUNEZ	1465 NW 97 AVE DORAL, FL 33172	
		N/A	
provis	mendment provides for an exchange, ions for implementing the amendmen not applicable, indicate N/A)	reclassification, or cancellation at if not contained in the amend	of issued shares, ment itself:
		WA	

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>	<u>Address</u>	Type of Action
P	CARLOS L SANCHEZ	1465 NW 97 AVE DORAL, FL 33172	
VP	MARIA E MONTER	1465 NW 97 AVE DORAL, FL 33172	☐ Add ☐ Remove
(attach a	ding or adding additional Articles, endeditional sheets, if necessary). (Be sy	pecific) I/A	
<u>provisi</u>	mendment provides for an exchange, ons for implementing the amendmen not applicable, indicate N/A)	reclassification, or cancellation t if not contained in the amends	of issued shares, nent itself:
		I/A	
		· · · · · · · · · · · · · · · · · · ·	

The date of each amendmen	t(s) adoption: 07/31/2011
Effective date if applicable:	07/31/2011 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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)
action was not required. The amendment(s) was/we	re adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder action and shareholder
action was not required.	
Dated_07/3	1/2011
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	CARLOS L SANCHEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)