P09000031280

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
—		—
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECIELIARI C. STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

Division of C		•	
NAME OF CORI	PORATION:	Estar Tek Inc	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NU	MBER:	P0900003128	0
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	is matter to the following:	
		Peggy K. Hooper	
	N	ame of Contact Person	
Hooper Group			
		Firm/ Company	
	904	2 Shawn Park Place Address	
		Address	
		Orlando, FL 32819 ity/ State and Zip Code	
	E-mail address: (to be use	eg@rbm.tv d for future annual report notification	
For further information	ation concerning this matter,	please call:	
	Peggy Hooper	at (407)	509-1461
	of Contact Person	Area Code & Daytime	····
Enclosed is a chec	k for the following amount n	nade payable to the Florida Dep	artment of State:
☐ \$35 Filing Fee	[7] \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
<u>Mailing A</u> Amendmer	nt Section	Street Address Amendment Section	
	f Corporations	Division of Corporations	
P.O. Box 6		Clifton Building	la
i aiianassee	e, FL 32314	2661 Executive Center Ci Tallahassee, FL 32301	rcie



May 21, 2009

PEGGY HOOPER 9042 SHAWN PARK PLACE ORLANDO, FL 32819

SUBJECT: ESTAR TEK INC Ref. Number: P09000031280

We have received your document for ESTAR TEK 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):

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

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) 245-6916.

Carol Mustain Regulatory Specialist II

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Letter Number: 109A00017389

Articles of Amendment to Articles of Incorporation of

Estar Tek Inc	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P0900031280	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the amendment(s) to its Articles of Incorporation:	following
A. If amending name, enter the new name of the corporation:	
Electronic Brain Inc The	new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation 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:	PILED
Name of New Registered Agent: N/A	
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 of the pos	on.

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
	N/A		— •

	nding or adding additional Ar additional sheets, if necessary).		
provis		change, reclassification, or cancelled endment if not contained in the am	
		1911-11-11-11-11-11-11-11-11-11-11-11-11	

The date of each amendment(s) ad	loption:5	37/09	_
Effective date if applicable:			····
(no	more than 90 days after a	mendment file date)	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were add by the shareholders was/were su		. The number of votes cast for the amend	ment(s)
		es through voting groups. The following sold to vote separately on the amendment(s):	
"The number of votes cast f	for the amendment(s) was/	/were sufficient for approval	
by	ing group)	,,,	
(voti	'ng group)		
The amendment(s) was/were add action was not required.	opted by the board of direc	ctors without shareholder action and share	eholder
The amendment(s) was/were add action was not required.	opted by the incorporators	s without shareholder action and sharehold	ier
Dated	109		
Signature			
(By a dir		officer - if directors or officers have not be	
	by an incorporator – if in d fiduciary by that fiducia	the hands of a receiver, trustee, or other or ary)	ourt
<u> </u>	//ifford D. 7	Hooper I name of person signing)	
TR	lesident		
-	(Title of person signing	ng)	