

P090000031280

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
ELECTRONIC BRAIN INC**

Certificate of Status	0
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Page Count	04
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 SEP 29 PM 3:00

FILED



September 29, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

ELECTRONIC BRAIN INC
5841 MEDINAH WAY
ORLANDO, FL 32819

SUBJECT: ELECTRONIC BRAIN INC
REF: P09000031280

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The date of adoption of each amendment must be included in the document.

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) 245-6925.

Teresa Brown
Regulatory Specialist II

FAX Aud. #: H10000213758
Letter Number: 710A00023101

RECEIVED
10 SEP 29 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H10000213758

Articles of Amendment
to
Articles of Incorporation
of

ELECTRONIC BRAIN INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P09000031280

(Document Number of Corporation (if known))

FILED
2010 SEP 29 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**)

4919 JETTON DRIVE

ORLANDO, FL 32837

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

4919 JETTON DRIVE

ORLANDO, FL 32837

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:

Corporate Creations Network Inc.

New Registered Office Address:

11380 Prosperity Farms Road #221E

(Florida street address)

Palm Beach Gardens

Florida 33410

(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.

Valerie Hawk-Donohue

Signature of New Registered Agent, if changing

Valerie Hawk-Donohue, Special Secretary

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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>	<u>Type of Action</u>
<u>P/V/P</u>	<u>Debra Zerfas</u>	<u>4919 JETTON DRIVE</u> <u>ORLANDO, FL 32837</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>DC</u>	<u>Debra Zerfas</u>	<u>4919 JETTON DRIVE</u> <u>ORLANDO, FL 32837</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>P</u>	<u>CLIFFORD D HOOPER</u>	<u>5841 MEDINAH WAY</u> <u>ORLANDO FL 32819</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

F. 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)

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The date of each amendment(s) adoption:

9/28/2010

(date of adoption is required)

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 September 28, 2010

Signature

Debra L. Zerfas
(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)

Debra L. Zerfas

(Typed or printed name of person signing)

President

(Title of person signing)