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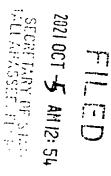
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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: EBS SYSTEM SOLUTIONS, CORP DOCUMENT NUMBER: PD900082687
DOCUMENT NUMBER: 1 U 1 U U U U 0 0 0 0 0 0 0 0 0 0 0 0 0
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Melissa Reyes Name of Contact Person
EBS System Solutions, corp
1217 SW 81St Ter
Address C 7 7 A /- [v
City/State and Zip Code MILYES (ealestate and State and Zip Communication) E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Hecter Herriera at (786) 302-7820 Name of Contact Person Area Code & Davime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

FILED

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<u></u>	SECRETARY OF GIALL
(Name of Corporation as current	ly filed with the Florida Deptt of State (1881) 1
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N. Landerdal, Fl 33068
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1217 Sw 81st Tew N. Lowderdale, fr 33069
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent Mellss	7 Rujes
New Registered Office Address: N. Lauder	(City) Florida 33068 (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

Check if applicable The amendment(s) is/are being tiled pursuant to s. 607.0120 (11) (c), F.S.

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example; X Change	<u>PT</u>	John Doe				
X Remove	<u>V</u>	Mike Jones				
<u>X</u> Add	<u>SV</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>			Address	C_{i}
1) Change	1	<u>van</u>	<u>essa</u>	Castro	1630 W. 40th	
Add Remove					Haleah, R 3:	3012
2) Change	<u>P</u>	Hec	ter He	EWera	1600 NE 15+	Ave
Add Remove Change					Miami, fc 33	5132
Add						
Remove						
4) Change			<u>.</u>			
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

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)	implementing the amendment if not contained in the amendment itself:	If amending or adding additional Article (Attach additional sheets, if necessary).	(Be specific)
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(if not applicable, indicate N/A)	licable, indicate N/A)	provisions for implementing the amer	ndment if not contained in the amendment itself:
		(if not applicable, indicate N/A)	

The date of each amendment(s) ac	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment fi	le date)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requestrement of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	oted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes east for ficient for approval.	the amendment(s)
	roved by the shareholders through voting groups. The just have writing group entitled to vote separately on the uni-	
"The number of votes cast I	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selected	ector, desident or other officer – if directors or officer. by an incorporator – if in the hands of a receiver, trust d fiduciary by that fiduciary)	s have not been ee, or other court
-	Hector Herrero (Typed or printed name of person signing)	<u> </u>
	President	
_	(Title of person signing)	