P10000037184

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	<u> </u>
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	-
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	·]

Office Use Only



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07/09/10--01038--001 **35.00



Amera Tuess 7-12-10

COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: Impress	ve Technology, I	nc.
DOCUMENT NUMBER: PIDOOOC	37184	
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
	SAYFIE	
	of Contact Person	
MPACS	irve /ECHNOCOGY, INC	<u>. </u>
616 St	13+h ST	
And the second second	Address ACE FC 33316 State and Zip Code	
JT SAYFIE	AHOD. COM	_
E-mail address: (to be used for	r future annual report notification)	
SATE -	at (954) 467 - 1814	4
Name of Contact Person	Area Code & Daytime Telephone N	lumber
Enclosed is a check for the following amount mad	e payable to the Florida Department of	f State:
\$35 Filing Fee \$\text{Certificate of Status}\$	Certified Copy Cert (Additional copy is enclosed) Cert	50 Filing Fee ificate of Status ified Copy
Mailing Address Amendment Section	Street Address Amendment Section	ditional Copy is enclosed
Division of Corporations P.O. Box 6327 Tallahassee FL 32314	Division of Corporations Clifton Building 2661 Executive Center Circle	·
· & \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Tellahaggas El 20201	

Articles of Amendment

	to		1	^
Artic	les of Incorpo	ration ,		·
	of		<u></u>	20/0
+ MPAESSIVE 1	ECHNOC	067 , F	t nc	TASEC SUL
(Name of Corporation as currently	filed with the F	lorida Dept. c	of State)	ALLANTAD.
P100.00037	184			TASECRETARY OF S
(Document Number of	of Corporation (i	f known)	i	COR
suant to the provisions of section 607.1006, Florandment(s) to its Articles of Incorporation:	orida Statutes, tl	nis <i>Florida Pr</i>	rofit Corporatio	n adopts the following
If amending name, enter the new name of the	corporation:)	
		e e	i	The new
ncipal office address <u>MUST BE A STREET AD</u>	. <u> </u>			
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	<u>ox</u>)			
	,			
			!	
If amending the registered agent and/or regist	ered office add	ress in Florids	a, enter the nan	ne of the
new registered agent and/or the new registered			;	
Name of Name Paristance & Associate			!	
Name of New Registered Agent:			•	
			<u> </u>	
·	· .	. 1		
New Registered Office Address:	(Florida si	reet address)		
New Registered Office Address:	(Florida si	reet address)	, Florida	

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: (Attach additional sheets, if necessary)

itle <u>Name</u> Ad	dress	Type of Ac
cer iTrade Enterpiers, P.C	Box 190483	Add
Tue M	iami Bch. tz	Remov
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		Add
		☐ Remov
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<u> </u>		. □ Add . □ Remov
-		
If amending or adding additional Articles, enter change	<u>te(s) here:</u>	
(attach additional sheets, if necessary). (Be specific)	·	
:		
· .		
<u> </u>		
	;	
<u> </u>	,	
If an amendment provides for an exchange, reclassific	cation, or cancellation of iss	ued shares.
provisions for implementing the amendment if not co		
(if not applicable, indicate N/A)	* * * * * *	
	i	
•		
	:	

The date of each amendment(s)		7/1/	2010	:
Effective date if applicable:	" (da	te of adoption is re	quired)	i
	o more than 90 day.	s after amentime h t	file date)	
				1
Adoption of Amendment(s)	(CHECK	ONE)		
The amendment(s) was/were a by the shareholders was/were s			per of votes cas	t for the amendment(s
The amendment(s) was/were a must be separately provided for		_		-
"The number of votes cast	t for the amendment	t(s) was/were suffic	cient for approv	/al
by			. ,,,	
(vo	ting group)		_	
The amendment(s) was/were a action was not required.The amendment(s) was/were a action was not required.	dopted by the incor	porators without sh		
Dated	6/21/2010			
selgete	irector, president or d, by an incorporate ted fiduciary by that	or – if in the hands		cers have not been rustee, or other court
	J.T.	SARFIE		
	(Typed or	r printed name of po	erson signing)	
	PRESID	OSVI	<u>.</u>	: -
	(Title of person	on signing)		