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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: ZEUS TECHNOLO	OGIES INC		
DOCUMENT NUM	IBER: P10000038762		<u></u>	
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Emilio Cuzan			
		Name of Contact Person	n	
	Zeus Technologies Inc			
		Firm/ Company		
	247 SW 8 Street #375			
	44-0	Address		
	Miami, Fl. 33130		••	
		City/ State and Zip Cod	c	
ecaz	ran@aðl.com			
	_	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
Emilio Cuzan		at (3951474	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
<u>M</u> :	ailing Address	Street	Address	
 -	nendment Section	Amendment Section		
	vision of Corporations D. Box 6327		on of Corporations Building	
	J. Box 0327 Ilahassee - FL 32314		Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

•	Amendment to Incorporation of All Control of State (Control of State)
1 +	to Incorporation
	of his to the same of the same
IS TECHNOLOGIES INC	100 C
(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
IS TECHNOLOGIES INC. PIOO O	1387102
(Document Number	r of Corporation (if known)
ant to the provisions of section 607.1006, Florida Statutes, the	nis Florida Profit Corporation adopts the following amendment
amending name, enter the new name of the corporation:	
	The new
must be distinguishable and contain the word "corporator," "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation r "Co". A professional corporation name must contain the
nter new principal office address, if applicable:	247 sw 8 street #375
cipal office address MUST BE A STREET ADDRESS)	miami, fl. 33130
Inter new mailing address, if applicable:	247 sw 8 street #375
failing address MAY BE A POST OFFICE BOX)	
failing address <u>MAY BE A POST OFFICE BOX</u>)	miami, fl. 33130
ailing address <u>MAY BE A POST OFFICE BOX</u>)	miami, fl. 33130
amending the registered agent and/or registered office ad	ddress in Florida, enter the name of the
amending the registered agent and/or registered office adwin egistered agent and/or the new registered office addre	ddress in Florida, enter the name of the ess:
amending the registered agent and/or registered office ad	ddress in Florida, enter the name of the ess:
	ddress in Florida, enter the name of the ess:
amending the registered agent and/or registered office adew registered agent and/or the new registered office address Name of New Registered Agent	ddress in Florida, enter the name of the ess: street address)

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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>VP</u>	Marcelo Cattarossi	125 san remo drive
Add x Remove			jupiter , fl. 33458
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

and the second s	cles, enter change(s) h (Be specific)			
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	inge, reclassification,	or cancellation of	issued shares,	
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<u>rovisions for implementing the amen</u>	idment if not containe			
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an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	idment if not containe			

	10/19/2015	
	doption:	, if other than the
date this document was signed.	•	
Effective date if applicable:		
	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirem epartment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the aufficient for approval.	amendment(s)
	proved by the shareholders through voting groups. The following group entitled to vote separately on the amenda	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action an	d shareholder
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder	areholder
10/19/201	5	
Dated		
Signature	y or other transfer of the second	41
(By a	director, plesid an or other officer – if directors or officers ha	ve not been or other court
	ited fiduciary by that fiduciary)	of other court
••	• •	
	Emilio Cuzan	
	(Typed or printed name of person signing)	V Mental
	President	
	(Title of person signing)	