P10000058418

(1	Requestor's Name)	
(,	Address)	
(,	Address)	<u></u>
((City/State/Zip/Phone #)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ORIANA TECHNOLOGIES, INC. DOCUMENT NUMBER: P10000058418				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Ralph E. Faraggi				
Name of Contact Person				
Ralph E. Faraggi, Attorney				
Firm/ Company				
401-400, Kensington Avenue				
Address				
Westmount, Québec, Canada, H3Y 3A2				
City/ State and Zip Code				
ref@faraggi.ca				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Ralph E. Faraggi <u>at (514</u> 898-7780				
Name of Contact Person Area Code & Daytime Telephone Number				
The same of the sa				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301				

Articles of Amendment Articles of Incorporation of



Oriana Technologies, Inc.

301.113.109.103.	-11 Z U	1ºM	1: .	
Name of Corporation as currently filed with the Florida Dept. of State)		. ,,	۱۰ ر	ĺ

(Name of Corporation as	currently filed with the	Florida Dept. of State)	— '!' !: વુક્
P10000058418		Violati Mepa, or State	
	nt Number of Corporation	(if known)	_
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	is Florida Profit Corporation adopts the following	ng amendment(s)
A. <u>If amending name, enter the new na</u> Select-TV Solutions (US	_		The new
	nation "Corp," "Inc," or	ion," "company," or "incorporated" or the "Co". A professional corporation name must "P.A."	abbreviation
B. Enter new principal office address,	if applicable:	N/A	
(Principal office address MUST BE A S		N/A	_
		N/A	- -
C. Enter new mailing address, if applicable: (Mulling address MAY BE A POST OFFICE BOX)		N/A	
	indiang dualess MAT DE ATOST OFFICE BOX		_
		N/A	_
		dress in Florida, enter the name of the	_
new registered agent and/or the new		<u>ss:</u>	
Name of New Registered Agent	N/A		
	N/A		
		street address)	
New Registered Office Address:	N/A	, Florida N/A	
	(Cit	y) (Zip Code)	_
New Registered Agent's Signature, if c			
hereby accept the appointment as regist	ered agent. I am familia	with and accept the obligations of the position.	
Siz	gnature of New Registered	d 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)

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 <math>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.

<u>PT</u> <u>Jo</u>	ohn Doe		
<u>V</u> <u>M</u>	like Jones		
<u>SV</u> <u>S</u>	ally Smith		
<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
N/A	N/A	N/A	
		N/A	
		N/A	
N/A	N/A	N/A	
		N/A	
		N/A	
N/A	N/A	N/A	
		N/A	
		N/A	
N/A	N/A	N/A	
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N/A	N/A	N/A	
		N/A	
		N/A	_
N/A	N/A	N/A	
		N/A	
		N/A	
	V M SV S Title N/A N/A N/A	Y Mike Jones SV Sally Smith Title Name N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	V Mike Jones SV Sally Smith Title Name Address N/A N/A N/A N/A N/A N/A

	(Be specific)
Α	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
A	

The date of each amendment(s) adoption: N/A	, if other than the
date this document was signed.	
Effective date if applicable: N/A	
(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"	
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 June 17, 2014	
Signature (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)	
Richard T. GROOME	
(Typed or printed name of person signing)	
Director, President & CEO, CFO & Executive Secretary	

Dogo 4 of 4

(Title of person signing)