Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H110002581953)))



H110002581853ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : I20000000257 Phone Fax Number

; (850)224-8870 : (850)222-1222

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please. **

m1 T	Address:		
الالتحادات	Address		

COR AMND/RESTATE/CORRECT OR O/D RESIGN GREEN X-RAY TECHNOLOGY, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: GREE	2 X-lay Technolog	Juc.
		A PERIOR CONTRACTOR	14,
DOCUMENT N	MBER: P 1100	∞ 82547	
The enclosed Artic	cles of Amendment and fee	are submitted for filing.	•
Please return all co	orrespondence concerning th	is matter to the following:	
	michael J	POUTIS. Name of Contact Person	
		Firm/Company	
	730 DUNL aus	ton are.	
	But orange	FC 32/27 Sity/ State and Zip Code	
	E-mail address: (to be use	of for juture annual report notification)	
For further informa	ation concerning this matter,	please call:	
MARION	J	at (386) 767. Area Code & Daytime Tel	0911
Name	of Contact Person	Area Code & Daytime Tel	lephone Number
Enclosed is a check	k for the following amount n	nade payable to the Florida Depar	tment of State:
335 Filing Fco	☐ \$43.75 Filing Fee & Certificate of Status	\$23.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ 352.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ad Amendmen		Street Address Amendment Section Division of Corporations	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallshassee, FL 32301

in the state of th	Articles of Amendment				
•	to				
A	rticles of Incorporation				
_	of			بررا	
GREEN X-ROM	Technology I	NC.	_ ~	增 值 - CD	\equiv
Name of Corporation as during	ntly filed with the Florida Den	t. of State)	<u></u>		Ħ
<u> </u>	<u>0008254</u> 7	_		3.5	2
(Document Num	ber of Corporation (if known)		_ ×	7 ~~	_
Pursuant to the provisions of section 607.1006	Florida Statutes, this Florida	Profit Corner	the note	ore.dhe	云。
amendment(s) to its Articles of Incorporation:	, x tox tox 2 (2001) 2, 100 2, 100 1100	Troje Obigora			***
A 36 nmanding name automaths are an are	dha as maamadan e		Ę	E E	20
A. If amending name, enter the new name of	tue cothornor?		ع	-	
	4 4 5			_The	неч
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the contain the word "chartered," "professional and the contain	lesignation "Corp," "Inc," or "	"Co". A profe	ssional ci	d" or orpori	' thi atio)
B. Enter new principal office address, if appli	cable: 301 Kg	evil war	th A	<u>ب</u>	
(Principal office address MUST BE A STREET	ADDRESS)			•	
•	<u>formage</u>	<u> </u>	_		ا. بد
	Ormond	Beach	<u> 70 ≾</u>	21	14
C Unfor now mailing address if applicables					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>ebox</u>) <u>301 K</u>	enillaba	11 A	<i>S</i> UZ	•
	Suite	4			
	Olmono	1 Kagch	_70	3)	17
			•		
D. If amending the registered agent and/or re- new registered agent and/or the new registered		an enter the n	ame of th	<u>10</u>	
	A STATE OF THE PARTY OF THE PAR				
Name of New Registered Agent:					
New Registered Office Address:	(Florida street address)	7			
_		, Florid	la		
	(City)	(Zip Code)			
New Registered Agent's Signature, if changing	Registered Agent:				
I hereby accept the appointment as registered age	ent. I am familiar with and acco	ept the obligation	ms of the	positi	on.

☐ Ad☐ ☐ Ref		NNEC	TIC	ON								NO. 75	550
removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) Litle Name Address Type o Address Type o Res Res Address Type o Res Res If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	tors.	0Y8. C	nței	r th	c tì	le and	nam	e of e	ach (office	r/di	rector be	ing
Lifle Name Address Type of Res Res Type of Res Type o	of ea	feac	<u>h ()</u>	ffic	er a	nd/or	Dire	ctor b	elne	adde	<u>d:</u>		
Ad Res Ad Res A													
Adding additional Articles, enter change(s) here: (altach additional sheets, if necessary). (Be specific) If an amendment provides for an exchange, reclassification, or cancellation of issued sharp provisions for implementing the suncodment if not contained in the amendment itself:					•	Addre	88					Type of	Acti
Adding additional Articles, enter change(s) here: (altach additional sheets, if necessary). (Be specific) If an amendment provides for an exchange, reclassification, or cancellation of issued sharp provisions for implementing the suncodment if not contained in the amendment itself:			_		_							☐ Add	
If amending or adding additional Articles, enter change(s) here: (altach additional sheets, if necessary). (Be specific) If an amendment provides for an exchange, reclassification, or cancellation of issued sharp provisions for implementing the amendment if not contained in the amendment itself:					-							□ Rem	iove
If amending or adding additional Articles, enter change(s) here: (altach additional sheets, if necessary). (Be specific) If an amendment provides for an exchange, reclassification, or cancellation of issued sharp provisions for implementing the amendment if not contained in the amendment itself:					_								
If amending or adding additional Articles, enter change(s) here: (altach additional sheets, if necessary). (Be specific) If an amendment provides for an exchange, reclassification, or cancellation of issued sharp provisions for implementing the syncodment if not contained in the amendment itself:			_		-							☐ Add	ΛVe
If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (He specific) If an amendment provides for an exchange, reclassification, or cancellation of issued shar provisions for implementing the suncodment if not contained in the amendment itself:					-							- 10311	.410
If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (He specific) If an amendment provides for an exchange, reclassification, or cancellation of issued shar provisions for implementing the suncodment if not contained in the amendment itself:		_	_		٠				_	_		□ Add	
(altach additional sheets, if necessary). (Be specific) If an amendment provides for an exchange, reclassification, or cancellation of issued sharp provisions for implementing the amendment if not contained in the amendment itself:			_		_							Rein	ova
(altach additional sheets, if necessary). (Be specific) If an amendment provides for an exchange, reclassification, or cancellation of issued sharp provisions for implementing the amendment if not contained in the amendment itself:					_			·	_				
provisions for implementing the suncodment if not contained in the amendment itself:					_		-,,-	 -					
provisions for implementing the suncodment if not contained in the amendment itself:	chan	chan	76. T	recl		leatio)	p. or	cance		on of	issu	ed shares	
	codp	adm	ent.	itx	ot c	ontain	ed ir	the s	dich	dmer	at it	elf:	•
							~						
													
													_

. 001	The date of each amendment(s) adoption: 10/26/11 (date of adoption is required)	P. 5/
)	The date of each amendment(s) adoption: 10/26/11	
		_
	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 east for the amendment by the shareholders was/were sufficient for approval.	vt(s)
	The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the unendment(s):	ynent
	"The number of votes cast for the amendment(s) was/were sufficient for approval	
	by	
	by	
•	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	lder
	The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
	Dated10/57/11	
	Signature (By a director, president or other officer. If directors or officers have not been	
	solected, by an incorporator if in the hands of a receiver, trustee, or other cou appointed fiduciary by that fiduciary)	;t
	Michael J. Politis (Typod or printed name of person signing)	
	(Thing or frame or herson whime)	
	TREASURER	
	(Tirle of person aigning)	