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SECRETARY OF STATE
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MAY - 2 2012 T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: M & A		R SERVI	CES INC
DOCUMENT NUMBER: P110000	096178		
The enclosed Articles of Amendment and	fee are submitted for f	iling.	
Please return all correspondence concernin	g this matter to the fol	lowing:	
MANOJ RA	JAYAH		
	Name of	Contact Person	
M&A COMF	PUTER SERV	/ICES IN	C ,
416 EEDNC		/ Company	
410 FERINC	REEK AVE		
ORLANDO,	-	Address	
	City/ Stat	e and Zip Code	
PROPREPLY@	HOTMAIL.C	MO	
~	: (to be used for future		otification)
For further information concerning this ma	•	407	. 227-0838
Name of Contact Person	a	Area Cod	227-0838 e & Daytime Telephone Number
Enclosed is a check for the following amou			
\$35 Filing Fee \$43.75 Filing Certificate of	Status Certified	d Copy nal copy is	Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Division Clifton I 2661 Ex	nent Section

Articles of Amendment Articles of Incorporation

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TALLAHASSET STATE	

M&A COMPUTER SERVICES INC.

(Name of Corporation as currently filed with the	ne Florida Dept. of State
P11000096178	he Florida Dept. of State)
(Document Number of Corporation	on (if known)
rsuant to the provisions of section 607.1006, Florida Statutes, t Articles of Incorporation:	this Florida Profit Corporation adopts the following amendmen
If amending name, enter the new name of the corporation	<u>u</u>
1&A INTEGRATED INC.	The new
tme must be distinguishable and contain the word "corpor Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ord "chartered," "professional association," or the abbreviation	ration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the on "P.A."
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered office a new registered agent and/or the new registered office add	
Name of New Registered Agent	
(Florida	da street address)
New Registered Office Address:	, Florida City) (Zip Code)

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)

(mach 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.

Example: X Change	<u>PT</u> <u>Jol</u>	nn Doe			
X Remove	<u>V</u> <u>Mi</u>	ke Jones			
X Add	<u>SV</u> <u>Sal</u>	ly Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Change Add Remove		.			
2) Change Add Remove		<u> </u>			
3) Change Add Remove					
4) Change Add Remove					
5) Change Add Remove		,			<u> </u>
6) Change					

	(Be specific)		
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If an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cand endment if not contained in the	ellation of issued she amendment itself:	<u>ares,</u>
provisions for implementing the ame	hange, reclassification, or cand endment if not contained in the	ellation of issued she amendment itself:	ares.
provisions for implementing the ame	hange, reclassification, or cand endment if not contained in the	ellation of issued she amendment itself:	ares,
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provisions for implementing the ame	hange, reclassification, or candendered in the	ellation of issued she amendment itself:	ares,
If an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or candendered in the	ellation of issued she amendment itself:	ares,

The date of each amendment(s)	adoption: 04/25/2012
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(10 mere man se adju djer amenamen je ame)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	et for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were ac action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ac action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated 04/25	/2012
Signature 4	ri
(By a	director, president or other officer – if directors or officers have not been
select	ed, by an incorporator – if in the hands of a receiver, trustee, or other court
арроі	nted fiduciary by that fiduciary)
	MANOJ RAJAYAH
	(Typed or printed name of person signing)
	PRESIDENT
ı	(Title of person signing)