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Greed

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION: Digital Systems In	tegration, Inc.		
DOCUMENT NUMBER				
The enclosed Articles of A	mendment and fee are su	bmitted for filing.		
Please return all correspon	dence concerning this ma	tter to the following:		
Do	na Eckert			
		Name of Contact	Person	
Dig	ital Systems Integration,	Inc.		
- ·		Firm/ Compa	ny	
739	North Drive Suite A			
	18 11.48.44 8.4	Address		
Me	lbourne, FL 32934			
		City/ State and Zip	p Code	
dona@ge	tdsi.com			
	E-mail address: (to be us	sed for future annual i	report n	otification)
	,		•	,
For further information co	ncerning this matter, pleas	se call:		
Dona Eckert		at (_321		255-0735 x301 e & Daytime Telephone Number
Name of C	ontact Person	Ar	rea Code	e & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Florida	a Depart	ment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name (of Corporation as curren	tly filed with the Florida Dep	t. of State)	
P12000070332	or corporation as current	ily med with the Fiornia Dep	is or state)	
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation a	dopts the following amendme	nt(s) to
A. If amending name, enter the new na	ame of the corporation:			
na			The new	,
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corpora		
B. Enter new principal office address,	if applicable:	na		
(Principal office address MUST BE A S			₹8 5	
				٠١
			· · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if appli		na		in O
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)		- K	\Box
			# 1 P	
			- January	
D. If amending the registered agent an new registered agent and/or the new			ne of the	
	na	<u>55:</u>		
Name of New Registered Agent	lia .			
		treet address)		
New Registered Office Address:	na	(Citv)	, Florida(Zip Code)	
		(Cny)	(Zip Code)	
New Registered Agent's Signature, if c				
I hereby accept the appointment as regist	tered agent. I am familiar	with and accept the obligation	s 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)

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	<u>PT</u>	John Do	<u>ee</u>		
X Remove	<u>v</u>	Mike Jo	<u>nes</u>		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change	S		Mark Drumm		739 North Drive
Add					Suite A
X Remove					Melbourne, FL 32934
2) Change		_			
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (If not applicable, indicate N/A)	If amending or add (Attach additional si	heets, if necessary).	(Be specific)	 -			
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)							
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	provisions for imp	plementing the ame	ndment if not co	ntained in the a	imendment itse	<u>if:</u>	
		ble, indicate N/A)					
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							<u></u>

J		
The date of each amendment(s) ac date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	clock does not meet the applicable statutory filing requirements, this date will no epartment of State's records.	ot be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voling group)	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
3-21-2018 Dated		
(By a d selecte	irector president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	Anthony Eckert	
	(Typed or printed name of person signing)	<u></u>
	President	
	(Title of person signing)	