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(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: TESCO	FINANCIAL SOLUTIONS INC	
DOCUMENT NUMBER: P12000096		
The enclosed Articles of Amendment and fee a		
Please return all correspondence concerning thi	s matter to the following:	
YULLY VILOR	IA	
	Name of Contact Person	
TESCO FINAN	ICIAL SOLUTIONS INC	
450-4-2-0-4-1-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4	Firm/ Company	
8045 NW 36TI	H ST STE 504-1	
+ ************************************	Address	
MIAMI, FL 331	66	
	City/ State and Zip Code	
	+. 0 /	
IESCOSOIU E-mail address: (to	be used for future annual report notification)	
D Hall dadiess, (to	or used for failte unital report formeanony	
For further information concerning this matter,	please call:	
VIII I V VIII ODIA	205 204 9662	
YULLY VILORIA	at (305) 394 8663	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount m	ade payable to the Florida Department of State:	
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	-	
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

TESCO FINANCIAL SOLUTIONS INC

(Name of Corporation as currently filed with the Florida Dept. of State)

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ent(s) to

(Document Numb	er of Corporation (if known)	URIDA
Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation:	orida Statutes, this Florida Profit Corporation	adopts the following amendme
A. If amending name, enter the new name of t	he corporation:	
TESCO EXPRESS INC		
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "oword "chartered," "professional association," of	Corp," "Inc," or "Co". A professional corp	
B. Enter new principal office address, if application (Principal office address MUST BE A STREET		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)	
D. If amending the registered agent and/or reg new registered agent and/or the new registered		name of the
Name of New Registered Agent		Markey .
***************************************	(Florida street address)	
New Registered Office Address:	. Flori	da
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age Signature	t Registered Agent; ent. I am familiar with and accept the obligate of New Registered Agent, if changing	ions of the position.

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:	, una sai	iy Smun, SV us an Aua.	
X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
l) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		····	
Add			
Remove			
5) Change			
Add		-	
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:		
(Attach additional sheets, if necessar	y). (Be specific)	
		
•		

Control of the Contro		
If an amendment provides for an o	exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the	exchange, reclassification, or cancellation of issued shares, amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A	1)	
	44. A. A. B. C.	
		

The date of each amendment(s) ad	option: 1-3-13
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	For the amendment(s) was/were sufficient for approval
by	(voting group)
The amendment(s) was/were adopaction was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
action was not required.	pted by the incorporators without shareholder action and shareholder
Dated 01/03/1	13
(By a di selected	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
• •	YULLY VILORIA
•	(Typed or printed name of person signing)
	PRESIDENT
·	(Title of person signing)