P13000021609

(Requestor	s Name)
(Address)	
(Address)	,
(City/State/	Zip/Phone #)
PICK-UP	WAIT MAIL
(Business I	Entity Name)
(Document	Number)
Certified Copies C	ertificates of Status
Special Instructions to Filing O	fficer:

Office Use Only



700255272957

01/09/14--01009--013 **43.75

14 JAN -9 AM 8:55 SECRETARY OF STATE FALL/AHZ SSECTED ORD

APPROVED

C. Lewis 14

COVER LETTER

TO: Amendment Section

Division of Corp	orations			
NAME OF CORPOR	RATION: Dossier A	pp inc.		
DOCUMENT NUMI	BER: P130000216	09	 <u></u>	
	of Amendment and fee are su			
		Č		
Please return all corre	spondence concerning this ma	iter to the following:		
	Kyle Parsons			
	Dossier Annine	Name of Contact Person	1	
	Dossier App inc	Firm/ Company	· · · · · · · · · · · · · · · · · · ·	
	13804 Lacebark			
		Address		
	Orlando, FL			
		City/ State and Zip Code	2	
kyl	e@skribe.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information concerning this matter, please call:				
Kyle Parsor	าร	at (407	595-0191	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment of State:	
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301	

APPROVED

Articles of Amendment to Articles of Incorporation

of

14 JAN -9 AM 8:55

SECRETARY OF STATE TALLAHASSEE FLORIDA

Dossier App Inc.

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

P13000021609

iment(s) to

,	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following amend
A. If amending name, enter the new name of the corporation:	
Skribe Inc.	The n
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the abbreviation. A professional corporation name must contain
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
 If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address: 	ss in Florida, enter the name of the
(Florida stree	et address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amehding 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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		<u> </u>	
Add Remove		•	
2) Change			
Add Remove			
3) Change	<u></u>		
Remove			·
4) Change			
Add Remove			
5) Change			
Add Remove			
6) Change			
Add .			
Remove			

amending or adding additional Artic ttach additional sheets, if necessary).	(Be specific)		
<u> </u>			
	<u> </u>		
•			•
, , , , , , , , , , , , , , , , , , , ,			
		 	·
			·
- ···		·	
			,
an amendment provides for an excha	ange, reclassification	, or cancellation of is	sued shares,
rovisions for implementing the amen (if not applicable, indicate N/A)	ndment if not contain	ned in the amendment	itself:
(ij noi applicable, maicale N/A)			·
,			
·	·-·		
·· -			_

APPROVED AND FILED

date this document was signed.	14 JAN -9 AM 8: 55	, if other than the
Effective date if applicable:	SECRETARY OF STATE	
	(no more thần 30 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	sted by the shareholders. The number of votes east for the amendment(s) ficient for approval.	
	oved 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 for	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/were adoptaction was not required.	sted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adoptaction was not required.	sted by the incorporators without shareholder action and shareholder	
Dated 1/7/14		
Signature		
selected,	ector, 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 diffiduciary by that fiduciary)	
ŀ	Kyle Parsons	
_	(Typed or printed name of person signing)	
(CEO	
	(Title of person signing)	