P130000 243/0

(Requestor's Name)	_
(Address)	-
(Address)	_
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PICK-UP WAIT MAIL	
(Business Entity Name)	_
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(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	7
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CIRCLE 1 TE	ECHNOLOGIES-	FLORIDA INC.					
DOCUMENT NUMBER: P240000310							
The enclosed Articles of Amendment and fee are sub	omitted for filing.						
Please return all correspondence concerning this mate	ter to the following:						
JAMES RAINE							
Name of Contact Person CIRCLE 1 TECHNOLOGIES- FLORIDA INC.							
10180 NW 21S	Firm/ Company						
PEMBROKE P	Address	26					
FLIVIDITORE	City/ State and Zip Code						
JR3906@MSN.C0	OM						
	ed for future annual report	notification)					
For further information concerning this matter, pleas	e call:						
JAMES RAINES	at (954	483-0874					
Name of Contact Person		de & Daytime Telephone Number					
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment of State:					
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is 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

Articles of Inco	orporation
Circle 1 Techno	109ies - Florida Inc.
(Name of Corporation as currently filed with the Flo	
	0
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cover word "chartered," "professional association," or the abbreviation "F	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	37 - 37 - 47 - 47 - 47 - 47 - 47 - 47 -
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
75. 16	
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address: (City)	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position
Signature of New Registered A	gent, if changing
J J	
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Page 1 of 4

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.

X Change	PT John	Doe	
X Remove	V <u>Mik</u>	e Jones	
X Add	SV Sally	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	CFO	WAINSWORTH JACKSON	2911 NW COMMERCE PARK
Add			BOYNTON BEACH, FL 33426
X Remove			
2) Change			-
Add			
Remove			
3) Change		***	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
_			
Add			
Remove			

Attach a	ding or addir additional she	ets, if necess	ary).	(Be specific)	_			
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i an am	endment pro ons for imple	ovides for a	a exchai	nge, reclass	ification, o	or cancellat	ion of issue	d shares,	
(if	not applicable	e, indicate N	<u>'/A</u>)	ment n no	t contamet	i in the am	enument us	en:	
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 07/17/2013	
Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
JAMES RAINES	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	