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COVER LETTER

Division of Corp			
NAME OF CORPO	RATION: ScanSys, I	nc.	
DOCUMENT NUM	BER: P1300003254	4	
	of Amendment and fee are su		
Please return all corre	spondence concerning this ma	tter to the following:	
	David Ellis		
		Name of Contact Person	n
	ScanSys, inc		
		Firm/ Company	
	207 Crystal Grov	e Blvd. Suite 10	2
		Address	
	Lutz, Fl. 33548		
		City/ State and Zip Cod	e
Elli	sd@scansys.us		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
David Ellis		at (813	de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)
<u>Ma</u>	iling Address	Street	Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

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SCANSYS, Inc.

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(Name of Corporation as currently filed with the Florida Dept. of State)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
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(Name of Corporation as currently filed with the Florida Dept. of S	tate)
P13000032544	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Co</i> its Articles of Incorporation:	rporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
APEX 7, Inc.	The new
name must be distinguishable and contain the word "corporation," "company," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professioword "chartered," "professional association," or the abbreviation "P.A."	
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)	
D. If amending the registered agent and/or registered office address in Florida, e new registered agent and/or the new registered office address:	ater the name of the
	•
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address: (City)	Florida
ic <i>n</i> _y y	(Lip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with and accept the	e obligations 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 <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>	John Do	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	nes	
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Address</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3)Change		_	· ·	
Add				
Remove				
4) Change				
Add				·
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

	(Be specific)
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provisions for implementing the ame (if not applicable, indicate N/.1)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendment(s) adoption: IVIAY 10, 2013		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required. The amendment(s) was/were addaction was not required.	opted by the incorporators without shareholder action and shareholder	
Dated M.	2/ Eh.	
(By a d selecte	lirector, 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)	
	David Ellis	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	