

P13000044055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

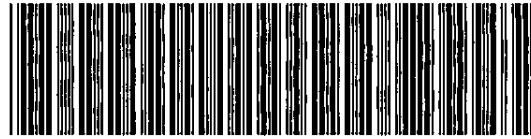
(Business Entity Name)

(Document Number)

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14 JAN 10 PM 3:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. Lewis
1-16-14

LAW OFFICE OF ROSS G. LAVIN, P.A.

Ross G. Lavin
Licensed in Florida and Texas
(561) 641.5440
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1481 S. Military Trail, Suite: 9
West Palm Beach, FL 33415
Email: rl@rosslavinlaw.com

January 3, 2014

**Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314**

RE: NTR Systems Resources, Inc., Articles of Amendment

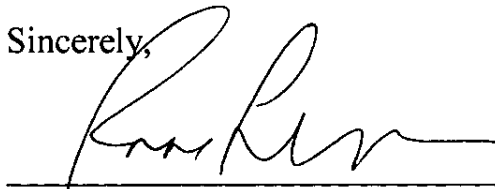
Dear Div. of Corps:

Enclosed please find the following:

1. Cover Letter;
2. Articles of Amendment;
3. Check in the amount of \$35.

Please process this in your usual fashion. Please feel free to contact me if you have any questions or comments.

Sincerely,



Ross G. Lavin

RGL.me

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: NTR SYSTEMS RESOURCES, INC.
DOCUMENT NUMBER: P13000044055

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSEPH NISON

Name of Contact Person

Firm/ Company

6384 GRIFFIS WAY

Address

WEST PALM BEACH, FL 33415

City/ State and Zip Code

JNISON@NTRINC.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSEPH NISON

Name of Contact Person

at (201) 519-4260

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

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

APPROVED
AND
FILED

14 JAN 10 PM 3:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NTR SYSTEMS RESOURCES, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

P13000044055
(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

6384 GRIFFIS WAY
WEST PALM BEACH, FL 33415

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

6384 GRIFFIS WAY
WEST PALM BEACH, FL 33415

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent JOSEPH NISON
6384 GRIFFIS WAY
(Florida street address)

New Registered Office Address: WEST PALM BEACH, Florida 33415
(City) (Zip 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 obligations of the position.

[Signature]
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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	P	LUIZA NISON	6384 GRIFFIS WAY WEST PALM BCH, FL 33415
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	S	SAME	SAME
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	P	JOSEPH NISON	6384 GRIFFIS WAY WEST PALM BEACH, FL 33415
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	S	SAME	SAME
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

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

N/A

F. 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)

N/A

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AND
FILED

14 JAN 10 PM 3:47

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

☐ 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 1/3/13

Signature [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)

JOSEPH NISON

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)