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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: SERVICELINK PROPERTIES, INC. DOCUMENT NUMBER: P13000056144 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Carolyn Saillant Name of Contact Person ServiceLink Properties, Inc. Firm/Company 6750 N. Andrews Ave, Ste 200 Address Ft. Lauderdale, FL 33309 City/ State and Zip Code accounts@slpropinc.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Carolyn Saillant Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment Articles of Incorporation

SERVICELINK PROPERTIES, INC.

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

P13000056144

(Document Number of Corporation (if known)

ment(s) to

. If amending name, enter the new name of the	<u>e corporation:</u>	
ame must be distinguishable and contain the v Corp.," "Inc.," or Co.," or the designation "Co ord "chartered," "professional association," or t	orp," "Inc," or "Co". A pro	any," or "incorporated" or the abo
Enter new principal office address, if applica		
rincipal office address <u>MUST BE A STREET A</u>	<u>IDDRESS</u>)	
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	
. If amending the registered agent and/or reginew registered agent and/or the new register		ida, enter the name of the
Name of Nam Paristand Assut		
Name of New Registered Agent		
Name of New Registered Agent	(Florida street address)	
Name of New Registered Agent New Registered Office Address:	(Florida street address)	, Florida_

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	<u>v</u> 1	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>V</u>	Carolyn Saillant	6750 N. Andrews Ave, Ste 200
X Add			Ft. Lauderdale, FL 33309
Remove		جراء المراكة Sholia Calistri	
2) Change	D	Sholia Calistri	6750 N. Andrews Ave., Ste 200
X Add			Ft. Lauderdale, FL 33309
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Add Remove			
Kemove			

, and the same of	icles, enter change(s) here: (Be specific)
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	····
16	nange, reclassification, or cancellation of issued shares,
II an amendment provides for an exch	iange, reciassification, or cancenation of issued snares.
provisions for implementing the ame	ndment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the ame	namee, reclassification, or cancellation of issued shares, and and an indicate in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:

	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)	
☐ 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.	
8/29/13	
Dated	
Signature (M	
(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)	
Carolyn Saillant	
(Typed or printed name of person signing)	
Vice President	
(Title of person signing)	