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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: Out of the B	ox Marketing an	d Consulting, Inc.				
DOCUMENT NUMBER: P13000076763							
	of Amendment and fee are sub						
Please return all correspondence concerning this matter to the following:							
	Dale M. Wagner						
	Name of Contact Person						
	Firm/ Company						
1621 Gulf Blvd #307							
	Clearwater, FL 3	Address 3767					
	City/ State and Zip Code						
 	E-mail address: (to be use	d for future annual report	notification)				
For further information concerning this matter, please call:							
Dale M. Wagner		_{at (} 727	439-0908				
Name of Contact Person		Area Cod	le & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:							
\$35 Filing Fee	Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address		Street Address					
Amendment Section Division of Corporations		Amendment Section Division of Corporations					
P.O. Box 6327		Clifton Building					
Talla	shassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301					

Articles of Amendment to Articles of Incorporation of

FILLD SECRITARY OF STATE: NVISION OF CORPORATIONS

14 OCT -8 AM 8: 47

Out of the Box Marketing and	d Consulting,	Inc.	14 001 U	KII 0' 4 '
(Name of Corporation as curren	tly filed with the Flo	rida Dept. of State)		_
P13000076763				
(Document Numb	per of Corporation (if I	(nown)		-
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this F	lorida Profit Corporation a	dopts the following	ng amendment(s) to
A. If amending name, enter the new name of t	the corporation:			
Dale M. Wagner, Inc.				The new
name must be distinguishable and contain the "Corp" "Inc.," or Co.," or the designation "word "chartered," "professional association," o	Corp, " "Inc, " or "C	o". A professional corpor		 ibbreviation
B. Enter new principal office address, if appli-				
(Principal office address MUST BE A STREET	ADDRESS)			
		7.2		_
•				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	F ROY)			
mumig aum cos may be A root of reco	<u>4.00%</u>)			
		·		-
·				
D. If amending the registered agent and/or re- new registered agent and/or the new registered		s in Florida, enter the nam	ne of the	
Name of New Registered Agent				
	(Florida stree	t address)	•	
New Registered Office Address:	:	, Florida		_
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing	Registered Agent:			
I hereby accept the appointment as registered ago		th and accept the obligation	s of the position.	
Cianatura	of New Registered Ag	ent 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 John Doe <u>PT</u> Y X Remove Mike Jones X Add Sally Smith Address s Type of Action Title Name (Check One) Change Add Remove Change Add Remove Change Add Remove Change Add Remove Change

Page 2 of 4

Add

Remove

Change

Remove

Add

amending or adding additional Arti tach additional sheets, if necessary).	(Be specific)
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	1
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	ł.
n amendment provides for an exch	hange, reclassification, or cancellation of issued shares.
ovisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	,

	10/1/2014	Searchar Division of D	EU Y OF STATE CRPORATIONS	
The date of each amendment date this document was signed.	(s) adoption: 10/1/2014	1/ OCT 0	44 0. 1.7	, if other than the
Effective date if applicable:	10/1/2014	14 OCT -8		
	(no more than §	0 days after amendmer	nt file date)	
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The sufficient for approval.	e number of votes cast	for the amendment(s)	
	e approved by the shareholders three d for each voting group entitled to			
"The number of votes	cast for the amendment(s) was/we	re sufficient for approv	al	
by	(voting group)		_·"	
action was not required.	e adopted by the board of directors			
Dated_10/1 Signature	Dale :m W	Tage		
. (E	y a director, president or other officected, by an incorporator – if in the pointed fiduciary by that fiduciary	e hands of a receiver, t	rustee, or other court	
	Dale M. Wagner (Typed or	printed name of person	signing)	
	President	•	• 0	
	· · · · · · · · · · · · · · · · · · ·	itle of person signing)		