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COVER LETTER

TO: Amendment Section Division of Corporations

P.O Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: BUE	Joan Dota Solutions Inc
DOCUMENT NUMBER: 121400	020694
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this r	natter to the following.
_ Mark	<u> </u>
	Name of Contact Person
Blue M	CON Data Schring Inc.
<u>21218 St.</u>	Andrews Blud # 527
_ Boca <u>Rat</u>	On FL 33433 City State and Zip Code
Diug much duit E-mail address: (to be t	used for future annual report nytification)
For further information concerning this matter, plea	ise call
Mark Careso	<u> </u>
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	
\$35 Filing Fee Section 1 \$43,75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations	Division of Corporations

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment

10

Articles of Incorporation of

Dhe Maca Data	i Schilous, Inc	是
(Name of Corporation as curre	ntly filed with the Florida Dept, of State)	-
P14CCUU224	44	ंड
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 1006, Florida Statutes, thuts Articles of Incorporation	is Florida Profit Corporation adopts the following amendme	ent(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporal "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," professional association," or the abbreviation	"Co" A professional corporation name must contain the	.1
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	21218 St. Andrews Blv #527	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	BCKA Ration, FI 3343 21218 St. Modinals B #527 BCKA Ration FI 3343	lvd
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre-	dress in Florida, enter the name of the ss:	
Name of New Registered Agent OCLIK (ansc	
21218 547	Fretreus Blvd # 527	
	treet address)	
New Registered Office Address DOCG +	Critical South Sou	
New Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent—I am familiar		
. Atark Caruse Signature of New.		
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 rule 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	e Jones	
X Add	SV Sally	Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	<u> </u>	S Marks	151 M. MODHINKA #178
Add Remove			Plantation Fr. 35324
2) Change Add	+	Mark (aniso	21218 St. Andrais Blue # 527
Remove 3) Change			Boaraton Fe 35433
Add			
(4) Change			
Rетюче			
(7) Change Add	 -		
Remove			
() Change Add			
Remove			

Attach additional sheets, if necessary)	ticles, enter change(s) here: (Be specific)	
	•	
n amendment arouides for an archi-	ange, reclassification, or cancellation of issued shares.	
ovisions for implementing the amend	direct if not contained in the amendment itself	
ovisions for implementing the amend (if not applicable, indicate N A)	idment if not contained in the amendment itself:	
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ovisions for implementing the amend	idment if not contained in the amendment itself:	

The date of each amendment(s) adoption:date this document was signed	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment)	file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records	nrements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for by the shareholders was/were sufficient for approval.	the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the analysis.	following statement tendment(x)
"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 action was not required	on and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action an action was not required	d shareholder
Dated 8 27 2018	
> Signature A lask Carris	
(By a director, president or other officer - if directors or officer	
selected, by an incorporator – if in the hands of a receiver, trust appointed fiduciary by that fiduciary)	lee, or other court
Mark Canso	
(Typed or printed name of person signing)	_
President	
(Title of person signing)	