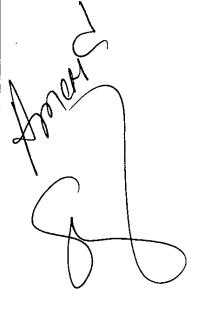
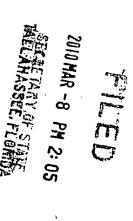


| | (Requestor's Name) |
|---------------------------------------|--------------------------|
| <u></u> | (Address) |
| | (Address) |
| · · · · · · · · · · · · · · · · · · · | (City/State/Zip/Phone #) |
| PICK-UF | P |
| | (Business Entity Name) |
| | (Document Number) |
| Certified Copies | Certificates of Status |
| Special Instructions | to Filing Officer: |
| · | |
| | |
| 20 | |
| | Office Use Only |



03/08/10--01047--013 **35.00



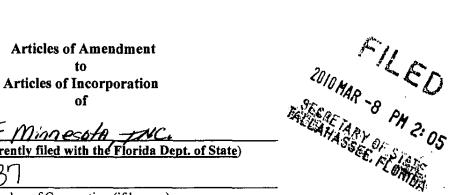


COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORE | PORATION: Ema | Inc. | | | |
|--|--|---|---|--|--|
| DOCUMENT NU | MBER: | 7 | <u> </u> | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | | |
| Please return all co | rrespondence concerning this ma | atter to the following: | | | |
| | Iren | e Overbeck | | | |
| | Name | of Contact Person | | | |
| | Ema | Inc. | | | |
| | Fi | rm/ Company | <u> </u> | | |
| | 2180 W | Xest S. R. 434 | Suite 6100 | | |
| • | , | Address | | | |
| * ** *** *** *** | Longuo | od, FL 32779 | -5013 | | |
| City/ State and Zip Code | | | | | |
| | | okolema-inc.co | SM | | |
| | E-mail address: (to be used for | future annual report notification) | | | |
| For further informa | ation concerning this matter, plea | se call: | | | |
| Trene | Overbeck | at (407) 786-E | 5372 | | |
| Name | of Contact Person | Area Code & Daytime Telep | hone Number | | |
| Enclosed is a check | k for the following amount made | payable to the Florida Departm | nent 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) | | |
| P.O. Box 6 | nt Section Corporations | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | | |

Articles of Amendment to



(Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following

| name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the | | |
|--|-------------------------|--------------------------------|
| name must contain the word "chartered," "pr | | |
| B. Enter new principal office address, if ap (Principal office address MUST BE A STRE | | |
| | | |
| C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF | | |
| | <u> </u> | |
| D. If amending the registered agent and/or | | Florida, enter the name of the |
| | istered office address: | |
| new registered agent and/or the new reg | | |
| Name of New Registered Agent: | | <u> </u> |
| | (Florida street ad | ldress) |
| Name of New Registered Agent: | | , Florida |
| Name of New Registered Agent: | (Florida street ad | , |

Page 1 of 3

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)

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|----------------|---|---|----------------|
| <u>VP.</u> | Mark Waronker | 2180 W State Rd 48L Suite 6100 Longwood, FL 32779 | Add Remove |
| <u> </u> | Mark Wehmeyer | | Add Remove |
| | | | Add Remove |
| | ding or adding additional Articles, enter additional sheets, if necessary). (Be specificational sheets) | | |
| | | | |
| | | | |
| | | | |
| | | | |
| <u>provisi</u> | mendment provides for an exchange, recloons for implementing the amendment if not applicable, indicate N/A) | | |
| | | | |
| | | | |
| | | | |

| The date of each amendment(s) a | doption: March 1, 2010 |
|--|---|
| , | (date of adoption is required) |
| Effective date if applicable: (no | more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/were ad by the shareholders was/were su | lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval. |
| | proved by the shareholders through voting groups. The following statemer 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 | ing group) |
| (vot | ing group) |
| The amendment(s) was/were adaction was not required. | opted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/were ad action was not required. | opted by the incorporators without shareholder action and shareholder |
| Ž. | 15/2010 |
| selected, | rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diffiduciary by that fiduciary) |
| | Bruce J. Bialka |
| | (Typed or printed name of person signing) |
| | Asst Secretary |
| | (Title of person signing) |