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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	o Filina Officer:	
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C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LACIS TECHMIN	FY INFO SOLUTIONS IN	CORPORATED	
DOCUMENT NUMB				
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this mat	ter to the following:		
	DHRUV PATEL			
		Name of Contact Person	l	
	PATEL & PATEL ACCOUNTING INC			
		Firm/ Company		
	4223 SW. 33RD ST	Time Company		
		Address		
	OCALA/ FL 34474			
		City/ State and Zip Code	111-7-111-11	
PATI	ELNPATEL@OUTLOOK.CO	DM		
	_	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
DHRUV PATEL		at (352	4616579	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:	
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	☐S43.75 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

FILED SECRETARY OF STATE DIVISION OF CORPORATION

Articles of Incorporation (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: 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (Florida street address)

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

. 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	<u> PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	ASHOKKUMAR JAIN	29 HATTERTOWN ROAD
Add			MONROE, CT 06468
X Remove			
2) Change			
Add			
Remove			
3) Change			***************************************
Add			
Remove			
4) Change			
Add			
Remove			<u> </u>
5) Change	<u> </u>		
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)		
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1. MAR. 490-7000			
		Death and the same	
f an amendment provides for an exch provisions for implementing the ame	ndment if not contained in t	he amendment itself:	
(if not applicable, indicate N/A)			
		<u> </u>	
3.310-01			

06/01/2016	FILEU COMMON
The date of each amendment(s) adoption:	SI CRETARY OF MISHER than the
date this document was signed.	MYISION OF CORPORATION
06/01/2016	
Effective date if applicable:	after amendment file date) 2016 AUG -5 PM 1: 45
tho more than 70 days	agier americanem fre titue)
Note: If the date inserted in this block does not meet the applicable sidocument's effective date on the Department of State's records.	tatutory filing requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The numb by the shareholders was/were sufficient for approval.	er of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through vomust be separately provided for each voting group entitled to vote se	
"The number of votes cast for the amendment(s) was/were suffi-	cient for approval
by	. "
(voting group)	
 The amendment(s) was/were adopted by the board of directors withou action was not required. The amendment(s) was/were adopted by the incorporators without sha action was not required. 	
·	
07/29/2016 Dated	
Signature frum	
(By a director, president or other officer – if	directors or officers have not been
selected, by an incorporator – if in the hand	
appointed fiduciary by that fiduciary)	
ANAND TIRUMANNI	
(Typed or printed name of	of person signing)
PRESIDENT / OWNER	
(Title of pare	on signing)