## P1600000 6289

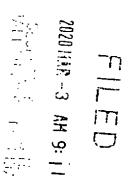
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Amend Name Ch?

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: System Z Inc				
DOCUMENT NUME	0.85000006380				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	Archie Harris				
		Name of Conduct reison	1		
	zSoft USA				
		Firm/ Company	<del></del>		
	2850 Interstate Drive	r mar Company			
	Address				
	Lakeland, FL 33805				
		City/ State and Zip Code	e		
archi	e@systemz.com				
——————————————————————————————————————	<b>O</b> -	sed for future annual report	notification)		
	1man address, (to be di	sea to rittle annua report	The tribution of the tr		
For further informatio	n concerning this matter, pleas	se call:			
Archie Harris		at ( <u>423</u>	505-5516		
Name	of Contact Person	Area Code & Daytime Telephone Nu			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:		
355 Filing Fee	□S43.75 Ulting Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	Ciss2 50 billing Fec Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section		Street Address Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clitton Building			
	ahassee, FL 32314		Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

of

System Z Inc					
( <u>Name o</u> P16000006289	f Corporation as current	ly filed with the Florida Dept.	of State) データ		
	(Document Number of	of Corporation (if known)	3		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation ado	pts the following amending		
A. If amending name, enter the new na	me of the corporation:		<b>₹</b> ?		
zSoft USA Inc			The nev		
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associat	ation "Corp," "Inc," or	"Co". A professional corporati	ated" or the abbreviation name must contain the		
B. Enter new principal office address, i	if applicable:	zSoft USA Inc			
(Principal office address MUST BE A ST		2850 Interstate Drive	2850 Interstate Drive		
		Lakeland, FL 338			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		zSoft USA Inc			
	<del></del>	2850 Interstate Drive			
		Lakeland, FL 33805			
D. If amending the registered agent an new registered agent and/or the new			of the		
Name of New Registered Agent	Registered Agents Inc				
Made by New Negliner curigent	7901 4th St N STI	= 300			
		treet address)			
New Registered Office Address:	St. Petersburg		Florida 33702		
	(City)		(Zip Code)		
New Registered Agent's Signature, if of thereby accept the appointment as registered.	cred agent. I am familiar	with and accept the obligations	of the position.		
<u> </u>	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, a 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:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Ch$ Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officer. 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Mike Jones, V as Remove Example:	, and Sal	ly Smith, SV as an Add.	
X Change	PT	John Doe	
X Remove	Y	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			
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			<del></del>
Remove			
4) Change			
Add			
Remove			<u> </u>
51 Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

	fing additional Art heets, if necessary).	(Be specifie)				
	-					
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<del></del>					<del></del>	
		·				
f an amendment i	orovides for an exc	hange, reclassifi	cation, or cancella	ition of issued sha	ires.	
provisions for im	plementing the amo	endment if not co	ontained in the an	rendment itself:	<del></del>	
(if not applica	ible, indicate N/A)					
		<u> </u>				

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.	2620	
1/1/. Effective date <u>if applicable</u> :	2020	
<u> </u>	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as t
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	rt.
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
-	(voting group)	
	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were addaction was not required.	opted by the incorporators without shareholder action and shareholder	
1/1/2020		
Dated	<del></del>	
	whie tham'	
Signature 41	lirector, president or other officer – if directors or officers have not been	
` ·	d, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ted fiduciary by that fiduciary)	
	Archie Harris	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	