## P18000041890

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	ATION: _I-brain Robo	tics, Inc.				
DOCUMENT NUMBI	ER: <u>P18000041890</u>					
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.				
Please return all corresp	ondence concerning this ma	tter to the following:				
		Santosh S. Kateka	ıri			
_	Name of Contact Person					
	Firm/ Company					
	7380 V	V Sand Lake Road S	Suite 500			
_		Address	<u> </u>			
_		_Orlando, FL 32819	9			
		City/ State and Zip Code	2			
_	E-mail address: (to be us	md@ibrainrobotics.r	net notification)			
For further information of	concerning this matter, pleas	se call:				
	S. Katekari	at (352	_)804-1241			
Name of Contact Person Area Code & Daytime Telephone Nu			de & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:						
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to **Articles of Incorporation** of

	n Robotics, Inc.	
(Name of Corporation as cu	rrently filed with the Florida Dept. of St	ate) :
P1	8000041890	
(Document Nur	mber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statute; its Articles of Incorporation:	s, this Florida Profit Corporation adopts th	e following amend <mark>me</mark> nt(s) to حی
A. If amending name, enter the new name of the corporati	ion:	_
		Thu way
name must be distinguishable and contain the word "corporation" Inc.," or Co.," or the designation "Corp," "Inc," or "Co" ("chartered," "professional association," or the abbreviation	o". A professional corporation name m	The new abbreviation "Corp.," ust contain the word
B. Enter new principal office address, if applicable:	7380 W Sand Lake Road	Suite 500
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Orlando, FL 32819	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7380 W Sand Lake Road Orlando, FL 32819	Suite 500
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad  Name of New Registered Agent	e address in Florida, enter the name of the ddress:	<u></u> <u>ne</u>
	ake Road Suite 500	<del></del>
	rida street address)	
New Registered Office Address:	Orlando Florid	la32819
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered is I hereby accept the appointment as registered agent. I am fam	niliar with and accept the obligations of the	position.
Signature of N	New Registered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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> <u>J</u>	ohn Doe	
X Remove	<u>V</u> <u>N</u>	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Cally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	_ P	Santosh S. Katekari	7380 W Sand Lake Road Suite 500
Add			Orlando, FL 32819
Remove			
2) X Change		Shubhada S. Katekari	7380 W Sand Lake Road Suite 500
Add			Orlando, FL 32819
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			<del></del>
Remove			
5) Change			
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

Attach addition	r adding additional Art ral sheets, if necessary).	(Be specific)	<del></del>			
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an amendme	ent provides for an excl	hange, reclassifi	estion or cancel	llation of issued s	charac	
<u>provisions for</u>	<u>implementing the ame</u>	endment if not c	ontained in the	mendment itsel	<u>[:</u>	
(if not app	licable, indicate N/A)					
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The date of each amendment(s) acd date this document was signed.	option:	, if other than the
-		
Effective date <u>if applicable</u> :	(no more than 90 days after amendme	ent file date)
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing partment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors wit	hout shareholder action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cas	t for the amendment(s)
	roved by the shareholders through voting groups. each voting group entitled to vote separately on the	
"The number of votes cast	for the amendment(s) was/were sufficient for appro	oval
by	•	
<u> </u>	(voting group)	·
DatedO7/:	2.4/2.02-0 Juricari	
(By a di selected	rector, president or other officer – if directors or of , by an incorporator – if in the hands of a receiver, ed fiduciary by that fiduciary)	
	Santosh S. Katekari	
	(Typed or printed name of person signir	g)
_	President	
	(Title of person signing)	