P18000072261

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I. LEMEUX



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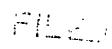
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TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: VPROLOGIC INC			
DOCUMENT NUMB	ER: P18000072261			
	of Amendment and fee are su	bmitted for filing.		
Please return all corresp	pondence concerning this ma	tter to the following:		
	NARASINGA R VINJAM			
=		Name of Contact Persor	1	
	VPROLOGIC INC			
-		Firm/ Company		
	8833 PERIMETER PARK B	LVD STE 1202		
-		Address		
	JACKSONVILLE, FL 32216	í		
-		City/ State and Zip Code	2	
nvinia	m@gmail.com			
	~~	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
NARASINGA R VIN.	JAM	904	314-2988	
Name o	f Contact Person	at () 314-2988 Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment 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)	
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 Articles of Incorporation of



		COM DEC 20 -		
(<u>Name o</u>	f Corporation as current	ly filed with the Florida Dept. of Sfate)		
18000072261	111 1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2			
···	(Document Number o	of Corporation (if known)		
Pursuant to the provisions of section 607.1 ts Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(
a. If amending name, enter the new na	me of the corporation:			
ELOGICSQUARE INC.		The new		
name must he distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associat	ation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the		
3. Enter new principal office address, i	if annlicable:	N/A		
Principal office address MUST BE A ST				
2 C	an belan			
Enter new mailing address, if applie (Mailing address MAY BE A POST C		N/A		
). If amending the registered agent an	d/or registered office add	lress in Florida, enter the name of the		
D. If amending the registered agent an new registered agent and/or the new				
new registered agent and/or the new				
	v registered office addres			
new registered agent and/or the new	v registered office addres N/A	<u></u>		
new registered agent and/or the new	N/A (Florida st			
	v registered office addres N/A	<u></u>		

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> </u>	John Do	2				
X Remove	V	Mike Jor	<u>ies</u>				
X Add	<u>sv</u>	Sally Sm	<u>ith</u>				
Type of Action (Check One)	<u>Title</u>		<u>Name</u>			<u>Addres</u> s	
1) N/A Change		_	N/A	 	_ ,		
Add						<u> </u>	
Remove							
2) Change		_					
Add							
Remove							·
3) Change		_			_		
Add							····
Remove							
4) Change							
Add							
Remove							
5) Change		_			_		
Add							
Remove							
6) Change		_			_		
Add							
Remove							

If an amendment provides for an exchange, reclussification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/4)		additional sheets, if necessary). (Be specific)
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	A	
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	pro	f not applicable, indicate N/A)
	\	
		

The date of each amendment(s)	adoption:	if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	s block does not meet the applicable statutory filing requirements, this date will no Department of State's records.	t be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
12/20/20 Dated	018	
Signature V	1. Mara Linga Raw a director, president or other officer – if directors or officers have not been	
selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	
	NARASINGA R VINJAM	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	