P98000000353

(Re	questor's Name)		
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(Cit	ty/State/Zip/Phone	: #)	
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SECRETARY OF STATE
TALL ABASSEF FLORID

Amend

11-10-08

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ATIANIAN BANTINI	- TECHNICUA OU
TAME OF CORD ORATION. TAY TERM	SOURCE BOSTING	CO DE STITUTE O CO / C
DOCUMENT NUMBER: P 980000	00353	
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
BETTY J. YAU	Ontact Person)	
INTERNATIONAL (Firm/	BOLTING TECH.,	TNC
P.O. Box 7406	dress)	
ORANGE CITY (City/ State)	FL 32774 and Zip Code)	
For further information concerning this matter, ple	ase call:	
(Name of Contact Person)		
Enclosed is a check for the following amount made	e payable to the Florida Departr	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)
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

		X
Articles of Amen	dment	2000
to Articles of Incorpo	oration 2	TONNON 3
of	n auon 7	
INTERNATIONAL BOLTING (Name of Corporation as currently filed with	ECHNOLOGIES the Florida Dept. of State	TWEET
P98000000 353	<u></u>	
(Document Number of Corpora	tion (if known)	
nant to the provisions of section 607.1006, Florida Statuwing amendment(s) to its Articles of Incorporation:	utes, this Florida Profit Co.	rporation adop
f amending name, enter the new name of the corporation	on:	
new name must be distinguishable and contain th		
orporated" or the abbreviation "Corp.," "Inc.," or Co	o.," or the designation "Coi	rp," "Inc," or "professional
orporated" or the abbreviation "Corp.," "Inc.," or Co". A professional corporation name must containation," or the abbreviation "P.A." Containation of the abbreviation that is applicable:	o.," or the designation "Coi	rp," "Inc," or "professional
orporated" or the abbreviation "Corp.," "Inc.," or Co". A professional corporation name must contain ciation," or the abbreviation "P.A." Enter new principal office address, if applicable: acipal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	o.," or the designation "Coi	rp," Inc," or "professional
corporated" or the abbreviation "Corp.," "Inc.," or Cop". A professional corporation name must contain ociation," or the abbreviation "P.A." Enter new principal office address, if applicable: incipal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office new registered agent and/or the new registered office address and/or the new registered office address.	e address in Florida, enter	"professional
orporated" or the abbreviation "Corp.," "Inc.," or Co". A professional corporation name must containation," or the abbreviation "P.A." Enter new principal office address, if applicable: acipal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX	e address in Florida, enter	"professional
corporated" or the abbreviation "Corp.," "Inc.," or Cop". A professional corporation name must contain ociation," or the abbreviation "P.A." Enter new principal office address, if applicable: incipal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office new registered agent and/or the new registered office address Name of New Registered Agent:	e address in Florida, enter	"professional
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) (If amending the registered agent and/or registered office address of Name of New Registered Agent:	e address in Florida, enter in da street address)	"professional

Page 1 of 3

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, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

<u>Title</u>	Name	<u>Address</u>	Type of Action
CRETARY	PAMELA OPMAZARAL GUTRERAS	BEY BRIGHT MEADOW D LAKE MARY, FI. 32 146	Add Remove
			Add Remove
			Add Remove
	ditional sheets, if necessary). (Be specific		
<u>provisio</u>	nendment provides for an exchange, reclassing for implementing the amendment if no of applicable, indicate N/A)		
	NA		
			
4.	B. C. State Company of the Company o		

The date of each amendment(s) adoption:
Effective date if applicable: 7/18/08 (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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 ."
by
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 10/23/08
Signature Settle of Joseph Signature (By a director president of other officer Sif directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
BETTY J, YOUNG (Typed or printed name of person signing)
(Typed or printed name of person signing)
PRESIDENT (Title of person signing)