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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	NELCO Three, Inc.		
DOCUMENT NUMBER: P98000003				
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.		
Please return all co	orrespondence concerning th	is matter to the following:		
	Darlene Lemke			
Name of Contact Person				
	CoAdvantage			
	Firm/ Company			
	111 W Jefferson, Suite 100			
Address				
	Orlando, Florida 32801			
		City/ State and Zip Code		
	dlemke@ E-mail address: (to be use	Ocoadvantage.com of for future annual report notification)	<u>.</u>	
For further inform	ation concerning this matter,	please call:		
	Darlene Lemke	at (407) 44 Area Code & Daytime Tele	7-1895	
Name	e of Contact Person	Area Code & Daytime Tele	phone Number	
Enclosed is a chec	k for the following amount n	nade payable to the Florida Departi	ment of State:	
□\$35 Filing Fee	\$43.75 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 Articles of Incorporation of



	O Three Inc	SECOND - 47
(Name of Corporation as curr	ently filed with the Florids	SECRETARY OF STATE Dept. of State LAHASSEE FLORIDA
(Name of Corporation as curr		DEPT. OF STATE
	000003121	
(Document Nur	nber of Corporation (if know	vn)
suant to the provisions of section 607.100 endment(s) to its Articles of Incorporation:	6, Florida Statutes, this <i>Fl</i> o	orida Profit Corporation adopts the follo
If amending name, enter the new name o	f the corporation:	
CoAdvantag	ge Resources 17, Inc.	The new
ne must be distinguishable and contain reviation "Corp.," "Inc.," or Co.," or the ne must contain the word "chartered," "pro	designation "Corp," "Inc,	" or "Co". A professional corporation
Enter new principal office address, if appincipal office address MUST BE A STREE		
		
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI		
		444
If amending the registered agent and/or a	registered office address in	Florida enter the name of the
new registered agent and/or the new regi		A 10110a, enter the name of the
Name of New Registered Agent:		
		* *
New Registered Office Address:	(Florida street ac	aaress)
New Registered Office Address:	(Florida street ac	
New Registered Office Address:	(Florida street ad (City)	, Florida (Zip Code)

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>	<u>Name</u>	Address	Type of Action
P/D	Benjamin Hewitt	111 W. Jefferson Suite 100 Orlando, Florida 32801	☐ Add ☐ Remove
P/D	Miguel Maseda	111 W. Jefferson Suite 100 Orlando, Florida 32801	
	· · · · · · · · · · · · · · · · · · ·		Add Remove
	ding or adding additional Articles, en dditional sheets, if necessary). (Be sp		
provisi	nendment provides for an exchange, ons for implementing the amendment of applicable, indicate N/A)		

The date of each amendment	(s) adoption:	October 12, 2011
Effective date <u>if applicable</u> :		(date of adoption is required)
Execute pare <u>it appreasie</u> .	(no more than 90	0 days after amendment file date)
Adoption of Amendment(s)	(CHI	ECK ONE)
The amendment(s) was/weby the shareholders was/web		shareholders. The number of votes cast for the amendment(s) approval.
` *	• •	e shareholders through voting groups. The following statemen group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amend	dment(s) was/were sufficient for approval
by		,,,
	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the b	board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the i	incorporators without shareholder action and shareholder
Dated	المحالا	
Signature	NC	Van
(By sele		ent or other office. – if directors or officers have not been corator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		Mark Lowrey
	(Турс	ped or printed name of person signing)
	Chie	ief Financial Officer & Treasurer
		person signing)