PASDODOIUDZ

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





200275482862

08/04/15--01007--015 **35.00



AUG 8 2015

ALBRITTON

COVER LETTER

Division of Corporations **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

TO: Amendment Section

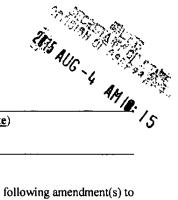
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

is enclosed)

Articles of Amendment Articles of Incorporation of



Extreme Computers, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P980000/6/02
(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corporation	
13rilliant	COMPUTERS INC. The new
name must be distinguishable and contain the word "cor" "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc. word "chartered," "professional association," or the abbrev	rporation," "company," or fincorporated" or the abbreviation c." or "Co". A professional corporation name must contain the viation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	1) Boca Raton FL 3:
	STE # 227
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5te # 27-146
	5te # 27-146
	BOCA RATON Fl, 33434
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office:	
Name of New Registered Agent	
-	
	orida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
_	
Name Particulation of the Association in the Indian	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	
Signature o	f 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)

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 <math>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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One) 1) Change Add Remove	Title S	Aimee Brilliant	Address 9045 La Fontana Blvd Boca Raton, FL 33434 # 227
2) X Change	TR	Aimee Brilliant	9045 la fontona Blud Suite # 227 Bock RATON, fr 3343
Remove 3) Change Add Remove		-	
4) Change Add Remove		<u> </u>	
5) Change Add		<i></i>	
Remove 6) Change Add			
Remove		-	

Attach additional sheets,	additional Articles, , if nec'essary). ' (B	e specific)				
····		/				
					•	•
		-				
,				. <u></u> .		
						
				•		
	+					
		j.				
f an amendment provi	das for an archana			C		
provisions for impleme	enting the amendm	ent if not contain	ined in the ame	<u>on or issueu sii:</u> ndment itself:	ires,	
(if not applicable, it	ndicate N/A)					
	····					
		_				
						·

The date of each amendment(s) adoption: _ date this document was signed.		, if other than the
date this document was signed.	ΛεΛΩ	
Effective date if applicable:	H SAY	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirements, this of State's records.	date will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)	•
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amendmen approval.	t(s)
☐ The amendment(s) was/were approved by t must be separately provided for each voting	the shareholders through voting groups. The following states ag group entitled to vote separately on the amendment(s):	ment
"The number of votes cast for the ame	endment(s) was/were sufficient for approval	
by		
(ve	oting group)	
action was not required.	e board/of directors without shareholder action and shareholder e incorporators without shareholder action and shareholder	der
Dated_ 7/31/	12015	
selected, by an inc	esident or other officer – if directors or officers have not been corporator – if in the hands of a receiver, trustee, or other corry by that fiduciary)	
mi	Typed or printed name of person signing)	
	President (Title of person signing)	
	(Title of person signing)	