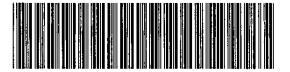
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TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: OFFICE ELEMENTS, INC.						
DOCUMENT NUM	DOCUMENT NUMBER: P99000074069					
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all corr	espondence concerning this ma	tter to the following:				
	DOUGLAS LACERRA					
		Name of Contact Person	n			
	OFFICE ELEMENTS, INC.					
		Firm/ Company				
	951 BROKEN SOUND PAR	KWAY #300				
	Address					
	BOCA RATON, FL 33487					
		City/ State and Zip Cod	e			
רו א	AXES@YAHOO.COM					
	•	sed for future annual report	notification)			
	L-man address. (to be us	sed for future armual report	notineation)			
For further informati	on concerning this matter, pleas	se call:				
BECKY WHEATOI	V	954 at (757-1955 			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check f	for the following amount made	payable to the Florida Depa	artment 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		Ameno Divisio	Address Iment Section on of Corporations			
P.O. Box 6327		Clifton Building				

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



OFFICE ELEMENTS, INC. 15 AUG 20 AM 9: 45 (Name of Corporation as currently filed with the Florida Dept. of State) P99000074069 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: 951 BROKEN SOUND PARKWAY #300 (Mailing address MAY BE A POST OFFICE BOX) BOCA RATON, FL 33487 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)

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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change			N/A	· · · · · · · · · · · · · · · · · · ·
Add				<u></u>
Remove				
2) Change				
Add				
Remove				
3) Change				
Add		_		
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		_		.
Remove				
Remove				
6) Change		_		.
Add				
Remove				

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
/A	•
•	
	•
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•	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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The date of each amendment(s) ad-	option:	, if other than the
date this document was signed.		FILED STARETARY OF STARE DIVISION OF CORPORATIONS
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
		15 AUG 20 AM 9: 45
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendation for approval.	dment(s)
	oved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment(
"The number of votes cast f	for the amendment(s) was/were sufficient for approval	
by	,,	
•	(voting group)	
☐ The amendment(s) was/were adopaction was not required.	oted by the board of directors without shareholder action and sha	reholder
☐ The amendment(s) was/were adopaction was not required.	oted by the incorporators without shareholder action and shareho	lder
JULY 8, 20 Dated	15	
Signature	hom 1	
selected	rector, president or other officer – if directors or officers have no , by an incorporator – if in the hands of a receiver, trustee, or other ad fiduciary by that fiduciary)	
1	DOUGLAS LACERRA	
•	(Typed or printed name of person signing)	
,	VICE PRESIDENT	
	(Title of person signing)	