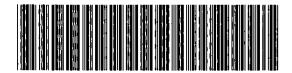
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(Requestor's N	ame)
(Address)	
(Address)	······································
(City/State/Zip/	Phone #)
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SUCREJARY OF STATE
ALLAHASSEE, FLORIDA

OCT 04 2012
T. LEMIEUX

COVER LETTER

TO: Amendment Secti Division of Corpo	rations		,
NAME OF CORPOR	ATION:	otech of	Font Laudendale
DOCUMENT NUMB	er: <i>VD</i>	2515	
The enclosed Articles of	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	Hai	RT DAV	(i)
-	Pnot	Name of Contact Pers	It LAND
·	4548	Firm/Company Ne ////	Ave
_	OAKLANA	Address JARK	F1 33334
	DHTMLOMAN E-mail address: (to be us	City/ State and Zip Co A A O L . C sed for future annual repo	Com
For further information	concerning this matter, pleas	se call:	
DAVID 1		at (954	1,771-2654
Name o	f Contact Person	Area (Code & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida De	epartment 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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Ame Divis Clifte	et Address Indiment Section Ision of Corporations Individual Executive Center Circle Indianate Section 1

Articles of Amendment

		το
rticles	of	Incorporation

	Articles of Inco	orporation			
Antotech	OF Ton	+ Auden	lale		
(Name of Corporation as curren	tly filed with the Fl	orida Dept. of State)		_	
1/02	<15				
(Document Numb	er of Corporation (if	known)		_	
Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation:	lorida Statutes, this I	Florida Profit Corpora	tion adopts the follow	ing amendme	ent(s) to
A. If amending name, enter the new name of t	he corporation:				
				The new	p
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Gword "chartered," "professional association," of	Corp," "Inc," or "C	Co". A professional c			
B. Enter new principal office address, if applie (Principal office address <u>MUST BE A STREET</u>				_	
		***** · ·		_	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)				
D. If amending the registered agent and/or reg new registered agent and/or the new registered			he name of the		
Name of New Registered Agent					
	(Florida stre	et address)			
New Registered Office Address:		, F	lorida		
	(City)		(Zip Code)		
New Registered Agent's Signature, if changing	Registered Agent:				
I hereby accept the appointment as registered ago			igations of the position ز		
Signature	of New Registered A	gent, if changing	r	2 9C1	1
			3	ASS.	
			ŗ		П
			-	η	-

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	PT John Doe	•
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One) 1) Change Add	P Name HART DAVID	Address 4548 NE 11 AVE OAKLAND BANK F/333
2) Change Add	UP HART STEWART	Same as above
Remove 3)ChangeAddRemove		
4) Change Add Remove		
5) Change Add Remove		
6) Change Add Remove		

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
-	
 	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption: Effective date if applicable: 9/20/20/2
(no indre 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" (voting group)
(voting group)
☐ 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 $9/\lambda 0/\lambda 0/\lambda$
Siamum (1) 1407
Signature (By a director, president or other officer – if 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)
DAV: D HART
(Typed or printed name of person signing)
PResident
(Title of person signing)