V27203

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

Office Use Only



000160937670

PRECEIVED

09 SEP 30 AM IO: 12

OF SEP 30 AM IO: 12

OF SEP 30 AM IO: 12



AJR 9/30/09

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 09-30-09 NAME: CADSOFT COMPUTER, INC TYPE OF FILING: ARTICLES OF AMENDMENT COST: \$70 **RETURN:** ACCOUNT: FCA00000015 **AUTHORIZATION:** ABBIE/PAUL H

FILEIST

FILED

Articles of Amendment to Articles of Incorporation 2009 SEP 30 AM 10: 40

of	TALLAHASSEE. FLORIDA
CADSOFT COMPUTE	R INC.
(Name of Corporation as currently filed with	the Florida Dept. of State)
V27203	
(Document Number of Corporat	ion (if known)
Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>n:</u>
KLS&RHO Service I	nc. The new
name must be distinguishable and contain the word "corp. abbreviation "Corp.," "Inc.," or Co.," or the designation "C name must contain the word "chartered," "professional associa	orp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable:	19620 Pines Blvd., Suite 217
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Pembroke Pines, FL 33029
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	19620 Pines Blvd., Suite 217
	Pembroke Pines, FL 33029
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add	
The state of the s	**************************************

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

(City)

Signature of New Registered Agent, if changing

(Florida street address)

, Florida

(Zip Code)

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

E. If amend	ding or adding additional Ardditional Sheets, if necessary).	ticles, enter change(s) here: (Be specific)	
F. If an a	nendment provides for an ex	change, reclassification, or cancella	ation of issued shares,
	ons for implementing the am of applicable, indicate N/A)	endment if not contained in the am	endment itself:

The date of each amendment	(s) adoption: 4-23 -09
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statemen d 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/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated_5	EPTEMBER 23, 2009
Signature	Q. Hon
sele	a director, president or other officer – if directors or officers have not been etted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	RUDOLF HOFFR
	(Typed or printed name of person signing)
	fresident
	(Title of person signing)