P1000043204

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JUN 1 5 2017 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ONE TIME SOFT	TWARE SOLUTIONS INC	
DOCUMENT NUMBER: P10000043204		· · · ·
The enclosed Articles of Amendment and fee are st	abmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
WESLEY BURGER or VA	NESSA PROTA	
	Name of Contact Person	1
	Firm/ Company	
211 SE 8TH STREET		
	Address	
DANIA BEACH, FL, 33004	1	
	City/ State and Zip Cod	2
wesley.burger@gmail.com		
E-mail address: (to be u	sed for future annual report	notification)
For further information concerning this matter, plea	se call:	
WESLEY BURGER	954 at (261 7855
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$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		Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

α	NE	TIME	SOFTW	ARE SOL	JUTIONS INC

(Name of Corporation as currently	y filed with the Florida Dept. of State)
P10000043204	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this and Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	Thenew
name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cord "chartered," "professional association," or the abbreviation "	Co". A professional corporation name must contain the
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
· ————————————————————————————————————	
	<u> </u>
 If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address: 	
Name of New Registered Agent	
(Florida stre	
New Registered Office Address:	, Florida
	· · · · · · · · · · · · · · · · · · ·
Sew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar w	with and accept the obligations of the position.
Circurtana of Vina D	egistered 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 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	$\underline{\mathbf{V}}$	Mike Jones	
X Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	P	VANESSA PROTA	211 SE 8TH STREET
X Add			DANIA BEACH
Remove			FL, 33004
2) Change			
Add			
Remove			
3) Change	-		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

Much additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
<u> </u>		_
<u>-</u>		
	-	
		·
an amendment provides for an exchiprovisions for implementing the amer	ange, reclassification, or cancellation of issued shandment if not contained in the amendment itself:	res.
(if not applicable, indicate NA)		



The date of each amendment(s) as	loption:	, if other than the
date this document was signed.		
Effective date if applicable:	9/2017	
пирисали.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this Education document's effective date on the De	lock does not meet the applicable statutory filing requirements, thi partment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendm flicient for approval.	ent(s)
☐ The amendment(s) was/were approvided for must be separately provided for	roved by the shareholders through voting groups. The following sta- each voting group entitled to vote separately on the amendment(s):	lement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
bv	."	
. —	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareh	older
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholde	г
Dated	06/09/2017	
Signature	WSMBUMM	
	rector, president or other officer - if directors or officers have not b	
	I, by an incorporator – if in the hands of a receiver, trustee, or other ed fiduciary by that fiduciary)	court
	(Typed or printed name of person signing)	
	(15) red of printed name of person signing)	
	President	
	(Title of person signing)	

