P18000027529

(Requestor's Name)	_
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	7

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: CIT COMPUTER	CORP	
DOCUMENT NUM	P18000027529		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	PETER A CAMPOS		
		Name of Contact Person	1
		Firm/ Company	
	151 BERKLEY RD STE 30	1	
	HOLLYWOOD FL 33024	Address	
		City/ State and Zip Code	3
For further information	E-mail address: (to be us on concerning this matter, pleas	sed for future annual report	notification)
PETER		at (³⁰⁵	519-1356
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.C	iling Address endment Section ision of Corporations b. Box 6327 lahassee, FL 32314	Amend Division The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

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(Name of Corporation as currently filed with the F 18000027529 (Document Number of Corporation (if k ursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Cor	lorida Dept. of State)
(Document Number of Corporation (if k	
·	noum)
arspant to the provisions of section 607-1006. Florida Statutes, this <i>Florida Profit Co</i>	
s Articles of Incorporation:	rporation adopts the following amendment
If amending name, enter the new name of the corporation:	
ime must be distinguishable and contain the word "corporation," "company," or "inc lnc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional conchartered." "professional association," or the abbreviation "P.A."	
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS	
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2020
· · · · · · · · · · · · · · · · · · ·	
	**
. If amending the registered agent and/or registered office address in Florida, er	nter the name of the بب
new registered agent and/or the new registered office address:	 သ
Name of New Registered Agent	ъ
	·····
(Florida street address)	
New Registered Office Address: (City)	, Florida(Zip Code)
(Cii)	(z.ip Grae)

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	CARLOS RODRIGUEZ CAN	IPOS 200 GATE RD # 203
X Add			HOLLYWOOD FL 33024-1368
Remove			
2) Change		- -	
Add			
Remove Change		<u> </u>	
Add			
Remove			<u></u>
4) Change			····
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

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f an amendment provide provisions for implementations.	des for an exch	nange, reclassif	cation, or cancel	lation of issued s	shares,	
(if not applicable, in	ndicate N/A)	101111111111111111111111111111111111111	THE REAL PROPERTY OF THE REAL	mendment user	<u></u>	
					_	

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07/22/2020	
The date of each amendment(s) adoption:	, if other than
date this document was signed.	
07/22/2020	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	shareholder
☐ 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)	
07/22/2020\	
Dated	
Signature Le Cul	
(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)	
appointed inductary by that inductary)	
PETER ANTHONY CAMPOS	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	