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## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

**Division of Corporations** NAME OF CORPORATION: Tax Masters Services INC DOCUMENT NUMBER: 84-3006022 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: William P. Wyche Name of Contact Person Tax Masters Services INC Firm/ Company 4993 NW 95th Ave Address Sunrise, FL 33351 City/ State and Zip Code newmeccarealty@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: William P Wyche at (954 ) 934-7594

Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □S52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment

## Articles of Incorporation

 $\mathbf{of}$ 

Tax Masters Services INC (Name of Corporation as currently filed with the Florida Dept. of State) 84-3006022 (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: Tax Blasters Services INC 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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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) . Florida New Registered Office Address: (City) 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 PTD. Changes should be noted in the following manner. Currently John Doc 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: <u>PT</u> X Change John Doe X Remove  $\underline{V}$ Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Type of Action <u>Title</u> <u>Name</u> Address (Check One) 1) Change \_\_ Add

	Remove						
2)	Change						
	Add						
3)	Remove						
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5)	Change						
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6)	Change		<del></del>				
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			Page 2 of 4				
E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)							

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F. If an amendment provides for an exch	nange, reclassification, or can	cellation of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)			
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	Page 3 of 4		
	11/20/2019		
The date of each amendment(s) adoption: late this document was signed.	:		, if other than the
Iffective date if applicable:			
	(no more than 90 days aft	er amendment file date)	

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	( <u>CHECK ONE</u> )				
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.				
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):				
"The number of votes ca	st for the amendment(s) was/were sufficient for approval				
by	<del></del>				
	(voting group)				
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder				
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder				
Dated 11/20/20	n/Wall				
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)				
	WILLEAM P WYCHE				
(Typed or printed name of person signing)					
	CEO				
	(Title of person signing)				