P1700000 5304

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ZRC Consulting So	ervices Inc.		
DOCUMENT NUMB	ER: P17000005304			
	of Amendment and fee are su	bmitted for filing.		
Please return all corresp	oondence concerning this ma	tter to the following:		
	Anthony Cooper			
•		Name of Contact Persor	1	
;	ZRC Consulting Services Inc.			
-		Firm/ Company		
•	933 Shotgun Road			
-	·-	Address		
:	Sunrise, FL 33326			
-		City/ State and Zip Code	2	
Antho	ny@milicon.us			
	·	sed for future annual report	notification)	
		•		
For further information	concerning this matter, pleas	se call:		
Anthony Cooper		at (632-6224	
Name o	f 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 & 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)	
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, F1, 32303	

Articles of Amendment to Articles of Incorporation of

ZRC Consulting Services Inc.

2020 0 115 77 2:52

\ <u>=</u>	of Corporation as curren	tly filed with the Florida Dept. of State)
217000005304		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607. Is Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s)
a. If amending name, enter the new na	ame of the corporation:	
		The new
	Sorp, " "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word ."
B. Enter new principal office address, if applicable:		933 Shotgun Road
Principal office address <u>MUST BE A S</u>		Sunrise FL 33326
2. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		933 Shotgun Road
		Sunrise FL 33326
). If a granding the registered agent a	ul/ou maniotamed office ad	dueso in Clauida, and and a constant
new registered agent and/or the new		dress in Florida, enter the name of the sss:
Name of New Registered Agent		
	02.2 Ch. dans Dans I	·
	933 Shotgun Road	
		treet address)
New Registered Office Address:		street address) , Florida 33326

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

X Change	<u>PT</u>	<u>John Doe</u>		
\underline{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			 	
Add				
Remove				
2) Change		_	 	
Add			·	
Remove 3) Change		_	 	
Add				_
Remove				
4) Change			 	
Add				
Remove				
5) Change		_	 	
Add				
Remove				
6) Change		_	 	
Add				
Remove				

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If an amendment provides for an exch	range reclassification or cancellation of iccord shares	
If an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and the contained in the amendment itself:	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
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(if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	

The date of each amendment(s) adoption:		, if other than the
date this document was signed.	11(01/2021)		
Effective date if applicable:	01/01/2020		
	(no more than	90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the		licable statutory filing requirements, this date	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
■ The amendment(s) was/were by the shareholders was/were		he number of votes cast for the amendment(s)	
		arough voting groups. The following statement ovote separately on the amendment(s):	rt
"The number of votes c	ast for the amendment(s) was/w	vere sufficient for approval	
by	(voting group)		
	(voting group)		
☐ The amendment(s) is/are bein	g filed pursuant to s. 607.0120	(11) (e). F.S.	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or	r board of directors without shareholder action	and shareholder
01/13/20	020		
Dated			
. .	11		
Signature	u director president or other off	ficer – if directors or officers have not been	
		the hands of a receiver, trustee, or other court	
	ointed fiduciary by that fiduciar		
	Anthony Cooper		
	(Typed or printed	d name of person signing)	
	President		
	(Title of person signing)		