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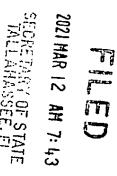
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	World System Solution				
					_
DOCUMENT NUMBER:					<u>.</u>
The enclosed Articles of Art	mendment and fee are subm	nitted for filing.			
Please return all correspond	ence concerning this matte	r to the following:			
John Jones					
		(Name of Contact P	'erson)		
World Systems Solutions I	nc.				
		(Firm/ Compan	y)		_
17512 NW 7th St.					
		(Address)			_
Pembroke Pines, FL 33029					
		(City/ State and Zip	Code)		_
sovereignty333@wssnow.c	гд				
I	-mail address: (to be used	for future annual re	port notification	n)	_
For further information con	cerning this matter, please	call:			
Amie Rafter		ន	916		
	(Name of Contact Person)	'	(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the	following amount made pa	yable to the Florida	Department of	State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certif is Certif	O Filing Fee icate of Status ied Copy tional Copy is osed)	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, Fl. 32303

Articles of Amendment

Articles of Incorporation of ED

World Systems Solutions Inc.		
(Name of Corporation as currently filed with the Florid	a Dept. of 2021eHAR 2 AM 7: 43	
	SECRETARY OF STATE	
(Document Nu	mber of Corporation of the OTEE, FL	
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	tutes, this <i>Florida Not For Profit Corporat</i>	ion adopts the following
A. If amending name, enter the new name of the corpo	ration:	
VII a		The new
name must be distinguishable and contain the word "corpo" "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	na	tion "Corp." or "Inc."
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u>nla</u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered office Name of New Registered Agent:		of the
New Registered Office Address:	(Florida street address)	
	, FI	lorida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an		f the position.
	Signature of New Registered Agent, if cha	nging

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 X Remove X Add	<u>v</u> <u>m</u>	hn Doe ike Jones Illy Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) × Change Add	SD	Shamra Tankersly-Strange	28823 Cliffside Dr. Malibu, CA 90265
Remove			
2) <u>× Change</u> Add	CD	Ragan O'Reilly	Montecito, CA 93108 Manker to Ca.
Remove 3) × Change Add Remove	D	Duane Carpenter	1468 Redwood Dr. Grass Valley, CA 95945
4) <u>x</u> Change Add	TD	Gary Faber	Address: 585 Euclid Ave. Berkeley, CA 94708
Remove			
5) Change × Add	<u>D</u>	Patricio Campiani	370 Ridgewood Rd. Key Biscayne, FL 33149
Remove			
6) × Change Add	<u>D</u>	Simon Cruz	Address: 5828 Pine Tree Dr. Miami Beach, FL 33140
Remove			
		l Articles, enter change(s) here: ary). (Be specific)	
X Remove	D	Yinuo Li	17512 NW 7th
			Pembroke Pines, FL 33029
			

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The date of each amendment(s) adoption:date this document was signed.				_, if other than th
2/24/21				
(no more the	an 90 days after am	endment file date)		
Note: If the date inserted in this block does not meet t	he applicable statut	ory filing requiremen	ts, this date will not	be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

document's effective date on the Department of State's records.

Adoption of Amendment(s)

Signature (By the chairman of vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Ragan Thomson (Typed or printed name of person signing) Chairperson of the Board (Title of person signing)	Signature (By the chairman of vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Ragan Thomson Ragan Thomson (Typed or printed name of person signing) Chairperson of the Board
(By the thairman of vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Ragan Thomson Ragan Thomson (Typed or printed name of person signing) Chairperson of the Board	(By the chairman of vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Ragan Thomson Ragan Thomson (Typed or printed name of person signing) Chairperson of the Board
(Typed or printed name of person signing) Chairperson of the Board	(Typed or printed name of person signing) Chairperson of the Board
Chairperson of the Board	Chairperson of the Board
(Title of person signing)	(Title of person signing)

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