N2100000862

(Re	questor's Name)	
(Ad	dress)	
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(Ĉit	y/State/Zip/Phone	· #)
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COVER LETTER

TO: Amendment Section Division of Corporations World System Solutions Inc. NAME OF CORPORATION: DOCUMENT NUMBER: ____ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: John Jones (Name of Contact Person) World Systems Solutions Inc. (Firm/ Company) 17512 NW 7th St. (Address) Pembroke Pines, FL 33029 (City/ State and Zip Code) sovereignty333@wssnow.org E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 916 549-7601 Amie Raster (Daytime Telephone Number) (Name of Contact Person) (Area Code) Enclosed is a check for the following amount made payable to the Florida Department of State: ■\$52.50 Filing Fee □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee &

Certified Copy

enclosed)

(Additional copy is

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Certificate of Status

Tallahassee, FL 32314

Street Address

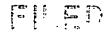
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Certificate of Status

Certified Copy (Additional Copy is

Enclosed)

Articles of Amendment to Articles of Incorporation of



2021 DEC 15 PH 1: 34

World Systems Solutions Inc.

Name of Corporation as currently filed with the Florid	da Dept. of State)		
U2/00000862		•	. · .
(Document Nu	imber of Corporation (if ki	nown)	
Pursuant to the provisions of section 617,1006, Florida Stamendment(s) to its Articles of Incorporation:	ntutes, this <i>Florida Not Fo</i>	or Profit Corporation add	opts the following
A. If amending name, enter the new name of the corpo	eration:		
			The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporated	I" or the abbreviation "C	Corp, " or "Inc."
B. Enter new principal office address, if applicable:		· · · · · · · · · · · · · · · · · · ·	
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>:SS</u>)		
			·- <u>-</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST_OFFICE BOX)			
(Mulling duaress MAT DE A POST OFFICE BOX)		-	
	<u> </u>	<u> </u>	
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 offi			
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·	
Visit Designation of Officer 1 1 Invest	ϵF	lorida street address)	
New Registered Office Address:			
	(City)	, Florida _ (Zip Co	ode)
	(0.137)	(134)	,
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I at	e <mark>red Agent:</mark> n familiar with and accept	the obligations of the po	osition.
	Signature of New Regist	tered 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 = ChiefExecutive Officer; CFO = Chief Francial 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>Doe</u> <u>Jones</u> <u>Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) × Change Add	TD	Duane Carpenter	1468 Redwood Dr. Grass Valley, CA 95945
Remove 2) Change Add	TD	Gary Faber	585 Euclid Ave. Berkeley, CA 94708
X Remove	<u>D</u>	Patricio Campiani	370 Ridgewood Rd. Key Biscayne, FL 33149
4) Change Add			
Remove 5)ChangeAdd			
Remove 6) Change			
Add Remove			
E. If amending or add (attach additional sh		rticles, enter change(s) here:). (Be specific)	
-		· · · · · · · · · · · · · · · · · · ·	

		<u>-</u> -
-		
		
 		
		-
The date of each amendment(s) date this document was signed.) adoption:	, if other than the
Effective date if applicable:	0/18/21	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will a Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were was/were sufficient for appr	re adopted by the members and the number of votes cast for the amendment(s) royal.	

There are no membadopted by the boa	bers or members entitled to vote on the amendment(s). The amendment(s) was/we ard of directors.	ere
Dated	10/31/21	
	0:0	
Signature ((By the chairman or vice/chairman of the board, president or other officer-if direct have not been selected, by an incorporator – if in the hands of a receiver, trustee, other court appointed fiduciary by that fiduciary)	ors or
	Ragam Thomson RAGAN THOMSON	
	(Typed or printed name of person signing)	
	Chairperson of the Board (Title of person signing)	
•	(1 mc hoterson as dans)	

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