# P0300002265

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### **COVER LETTER**

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TO: Amendment Section Division of Corporations NAME OF CORPORATION: Business Consulting and Solutions Inc. DOCUMENT NUMBER: P03000002265 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DORYS MARTINEZ Name of Contact Person Business Consulting and Solutions Inc. Firm/ Company 7222 SPIKERUSH LANE Address WINTER GARDEN, FL 34787 City/ State and Zip Code DORYSM\_2000@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305 ) 972 -5591
Area Code & Daytime Telephone Number **DORYS MARTINEZ** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □S43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

# **Mailing Address**

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

### Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

is enclosed)

## Articles of Amendment

# to Articles of Incorporation of

Business	of	
BUSSINES CONSULTING AND SOLUTIONS, INC.		
(Name of Corporation as	s currently filed with the Florida Dept. of State)	
203000002265		
(Document )	Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006. Florida Stat ts Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment	ent(s)
A. If amending name, enter the new name of the corpor	cation:	
	The new	ı•
	corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the	7
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRES	<u>SS</u> )	
C. Enter new mailing address, if applicable:	19 SEP	T'1
(Mailing address <u>MAY BE A POST OFFICE BOX</u>		n 7
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.		
Name of New Registered Agent		
	Florida street address)	
New Registered Office Address:	. Florida	
	. Florida (City) (Zip Code)	

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 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	DORYS MARTINEZ	7222 SPIKERUSH LANE
X Add			WINTER GARDEN, FL 34787
Remove			
2) Change			
Add			
Remove			
3 ) Change		<del>-</del>	<u>So</u>
Add			- Se 6
Remove			
4) Change			
Add			OPHILA
Remove			
5) Change			<del></del>
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)		
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			P.X
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,	STALE TLORIDA	ယ္
provisions for implementing the ame	endment if not contained in the amendment itself:	95	٤۽
(if not applicable, indicate N/A)		-	
<u> </u>			
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75 day 4 h h h h h h h h	AUGUST 27, 2019			
The date of each amendment(s) a date this document was signed.	deption:	if o	ther t	han the
Effective date if applicable:				
	(no more than 90 days after amendment file date)			
Note: If the date inserted in this bedocument's effective date on the De	plock does not meet the applicable statutory filing requirements, this date variation of State's records.	vill not be	listed	l as the
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) efficient for approval.			
☐ The amendment(s) was/were app must be separately provided for	aroved by the shareholders through voting groups. The following statement 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)			
The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	SECKL	19 SEI	erner i
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	_;-<	-3 F	
08/27/2019 Dated			Р <b>Н</b> 3:	Ö
Signature L	Marken O	11: 10:4	42	
	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	<del></del>		
-	Dorys Martinez			
	(Typed or printed name of person signing)		_	
1	PRESIDENT			
	(Title of person signing)		_	