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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Official Solutions Inc DOCUMENT NUMBER: P05000043172 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Henry Fernandez Name of Contact Person Official Solutions Inc Firm/ Company 50 Andros Rd Address Palm Springs, Florida 33461 City/ State and Zip Code nancy@officialsolutions.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Yoan Fernandez Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee¹ □\$43.75 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 is enclosed)

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

Articles of Amendment to Articles of Incorporation of

Official Solutions Inc				
(Name of Corporation as curre	ently filed with the F	Florida Dept. of S	tate)	゙゙゙゙゙゙゙
P05000043172				13 OCT
(Document Num	nber of Corporation (if known)		
P0500043172 (Document Num Pursuant to the provisions of section 607,1006, its Articles of Incorporation: A. If amending name, enter the new name of N/A	Florida Statutes, this	Florida Profit Co	rporation adopts the following	ng amenda
A. If amending name, enter the new name of	the corporation:			ب ع
N/A				ט The ne
name must be distinguishable and contain th "Corp.," "Inc.," or Co.," or the designation word "chartered,","professional association,"	"Corp," "Inc," or '	'Co''. A profession	or "incorporated" or the a onal corporation name must	bbreviatio
B. Enter new principal office address, if app	licable:	13432 68th Street N		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		West Palm Beach		
		Florida 33412		-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		13432 6	8th Street N	_
		West Pa	lm Beach	
		Florida 33412		
D. If amending the registered agent and/or r	existered office add	roce in Florido, as	nter the name of the	
new registered agent and/or the new regis			iter the name of the	
Name of New Registered Agent	an Fernande	Z		
134	432 68th Stre	eet N		
	(Florida sti	reet address)	.	
New Registered Office Address: West Palm Bea		ch	, Florida 33412	
	(City))	(Zip Code)	_
. 1				
New Registered Agent's Signature, if changing the large of the appointment as registered a second control of the large of the appointment as registered as the large of the la	ng Redistered Agent geft. Lam Jamiliar	:: with and accept th	ne obligations of the position.	
Signatur	e of New Registered	Agent, if changing	T	

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>Jol</u>	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
_ <u>X</u> Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>P</u>	Henry Fernandez	50 Andros Rd
Add			Palm Springs
X Remove			Florida 33461
2) Change	<u>P</u>	Yoan Fernandez	13432 68th Street N
X Add	- · · · · · · · ·		West Palm Beach
Remove			Florida 33412
3) Change		•	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		-	
Add			
Remove			
6) Change			
Add			
Remove			

(Attac	h <i>additi</i>	onal sheets, if nec	essary).	s, enter change(s) here: Be specific)		
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[fan	amend	ment provides for	r an exchai	ge, reclassification, or ca	ncellation of issued shares,	
prov	visions f	or implementing	the amend	nent if not contained in t	he amendment itself:	
	(if not a	pplicable, indicat	e N/A)			
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The date of each amendment	September 1, 2013	, if other than the
date this document was signed		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wes	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Se Dated	eptember 1, 2013	
Signature		
(E	by a director, president or other officer – if directors or officers have not been effected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Yoan Fernandez	
	(Typed or printed name of person signing)	
	President	
: :	(Title of person signing)	