## P07000038238

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SECRETARY OF STALE
DIVISION OF CORPORATION

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Professiona	al Services Inter	national, Inc.	
DOCUMENT NUM	BER: P0700003823	8		
	s of Amendment and fee are su			
Please return all corre	espondence concerning this ma	tter to the following:		
	Matthew Lewis			
•	Name of Contact Person			
	Professional Services International, Inc.			
	3	Firm/ Company		
	2816 E Robinson St			
		Address		
-	Orlando, FL 32803			
		City/ State and Zip Cod	e	
nre	serviceseng@hot	mail com		
<u>pro</u>		sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se cali:		
Matthew Lev	wis	at (407	376-5509	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check f	or 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)	
Mailing Address		Street	Address	
Amendment Section		Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327		Clifton Building 2661 Executive Center Circle		
Tallahassee, FL 32314		Tallahassee, FL 32301		

## Articles of Amendment to Articles of Incorporation of

Professional Services In	ternational, Inc.			
(Name of Corporation as	currently filed with the Flo	rida Dept. of State)		-
P07000038238				
(Documer	nt Number of Corporation (if	known)	1	•
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	<i>lorida Profit Corporation</i> ad	opts the followin	g amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
				The new
name must be distinguishable and con. "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa  B. Enter new principal office address, (Principal office address MUST BE A S	ation "Corp," "Inc," or "C tion," or the abbreviation "P if applicable:	o". A professional corpora		
C. Enter new mailing address, if applied (Mailing address MAY BE A POST)				OWISION OF COMPOSE AT PAN
D. If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the nam	<u>ie of the</u>	25. H
Name of New Registered Agent	Matthew Lewis			
	2816 E Robinson	 n St		
	(Florida stree			
New Registered Office Address:	Orlando	. Florida	32803	
	(City)		(Zip Code)	-
New Registered Agent's Signature, if c I hereby accept the appointment as regist  Signature.			s of the position.	

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)	Title	<u>Name</u>	Address
1) Change	Р	Matthew Lewis	2816 E Robinson St
Add			Orlando, FL 32803
Remove			·
2) Change	<u>P</u>	Amanda Cooper	2816 E Robinson St
Add			Orlando, FL 32803
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			<del> </del>
5) Change		A	
Add			
Remove			
6) Change			<del></del>
Add			•
Remove			

stach additional sheets, if necessary). (Be specific)  I an amendment provides for an exchange, reclassification, or cancellation of issued shar	
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	es,
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
<b>/A</b>	
·	

The date of each amendment(s) ad date this document was signed.	loption:	, if other than the		
Effective date if applicable:				
	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.			
	roved 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 ado action was not required.	pted by the board of directors without shareholder action and shareholder			
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder			
Dated_03/30/20	015			
Signature	(m////	_		
	rector, president or other officer – if directors or officers have not been 1, by an incorporator – if in the hands of a receiver, trustee, or other court			
	ed fiduciary by that fiduciary)			
	Matthew Lewis			
•	(Typed or printed name of person signing)	_		
	President			
	(Title of person signing)			