

,	(Requestor's Name)			
	(Address)			
	(Address)			
	(City/State/Zip/Phone #)			
PICK-UF	P WAIT MAIL			
	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

Office Use Only

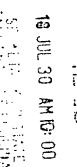


300316273313

07/30/18--01029--030 *+55.00

And

K WHILE



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: Work IT Solutions	s, Inc.	· · · · · · · · · · · · · · · · · · ·		
DOCUMENT NUMBE	CR:				
The enclosed Articles of	*Amendment and fee are sul	bmitted for filing.			
Please return all correspond	ondence concerning this mat	ter to the following:			
C	hristopher T. Frederick				
***		Name of Contact Person	1		
V	Vork IT Solutions, Inc.				
		Firm/ Company			
P	Firm/ Company PO Box 47315				
_		Address			
Т	ampa, FL 33646				
_		City/ State and Zip Code	;		
cfreder	rick@workitsolutions.com				
		ed for future annual report	notification)		
For further information of Christopher T. Freder	concerning this matter, pleas	e call: at (579-7207		
Name of Contact Person		at (Area Coo)		
	the following amount made p				
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301		

Articles of Amendment to Articles of Incorporation of

FILED
18 JUL 30 AM 10: ON

Work IT Solutions, Inc.

(Name of Corporation as currently			
 	thled with the Florida Dept. of State)		
07000111806			
(Document Number of	Corporation (if known)		
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> s Articles of Incorporation:	Florida Profit Corporation adopts the following amendments		
. If amending name, enter the new name of the corporation:			
	The new		
ume must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "C ord "chartered," "professional association." or the abbreviation ";	Co". A professional corporation name must contain the		
. Enter new principal office address, if applicable:	19006 1st Street S.W.		
Principal office address MUST BE A STREET ADDRESS)	Lutz, FL 33548		
. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
. If amending the registered agent and/or registered office addr			
new registered agent and/or the new registered office address:			
new registered agent and/or the new registered office address:	<u> </u>		
new registered agent and/or the new registered office address:			
Name of New Registered Agent Name of New Registered Agent			

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:	е, ана ма	ay smun, .	or as an saa.	
X Change	<u>PT</u>	John Do	<u>oc</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	nes	
X Add	<u>sv</u>	<u>Sally Sn</u>	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP		Whitney A. Marrow	1379 Spruce Dr. SE
X Add				Smyrna, GA 30080
Remove				
2) Change	<u> </u>	_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

f amending or adding additional A Mach additional sheets, if necessary	v). (Be specific)			
				,
				
		,		
· · · · · · · · · · · · · · · · · · ·				
		-		
				
				
				
				
f an amendment provides for an e	vehange reclassi	fication or cancel	lation of issued sha	res
provisions for implementing the a	mendment if not	contained in the a	mendment itself:	110
(if not applicable, indicate N/A)			
		-		
			 	
		·~	·	

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes case	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
0701/201 Dated Signature	8	
(By a c	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court ated fiduciary by that fiduciary)	
	Patricia A. Marrow	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	<u></u>