2 0001/0006

Page 1 of 2

Division of Corporations Electronic Filing Cover Sheet

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(((H15000133548 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: EAGLE TAX REPRESENTATION, CORP.

Account Number : 120070000037

: (954)532-3842

Phone Fax Number

: (954)532-3847

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please **

COR AMND/RESTATE/CORRECT OR O/D RESIGN QSS INTERNATIONAL INC.

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section Division of Corpor			
NAME OF CORPORA	ATION: QSS INTERNATION	UNAL INC.	
DOCUMENT NUMBI			
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
(DLAVO G NETO		
_	· · · · · · · · · · · · · · · · · · ·	Name of Contact Persor	1
I	EAGLE TAX REPRESENTA	ATION, CORP	
_		Firm/ Company	
S	493 WILES ROAD STE 10	• •	
_		Address	
(COCONUT CREEK, FL 330	73	
_		City/ State and Zip Code	;
paulo@	Deagle-tax.com		
puntog	•	ed for future annual report	notification)
	•	·	•
For further information	concerning this matter, pleas	c call:	
Paulo Oliveira, EA		at (532-3842
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment 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)
Amen Divisi P.O. I	ng Address Idment Section Idment Sec	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

QSS INTERNATIONAL INC.					
(Name of Corporation as curr	ently fligd with the Florida Dep	t, of State)	*		
P09000058689					
(Document Numb	er of Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	this Florida Profit Corporation a	dopts the follo	wing amend	lment(:	s) to
A. If amending name, enter the new name of the corporation	<u>:</u>				
OGN COMMUNICATIONS, INC.			The n	7/700	
name must be distinguishable and contain the word "corpore" "Curp.," "Inc.," or Co.," or the designation "Corp." "Inc," word "chartered," "professional association," or the abbreviation	or "Co". A professional corpor	oraled" or the atlon nume mi	abhrevial	ion	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				- -	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				- -	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addresses		me of the	•		
Name of New Registered Agent			_		
(Florida	a stroct address)				
New Registered Office Address:		, Florida		_	
	(City)	(7	(ip Code)	_	
		6/2	0	ه	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	ent: iar with and accept the obligation	s of the positio	ALL MASSEE.	15 JUN -4 AM	FILED
Signature of No	w Registered Agent, if changing		FLORDA	17:19	

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 Doc 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 Doc	
X Remove	¥	Mike Jones	
_X ∧dd	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1)Change			
Remove			
2) Change			
Add			
Remove			
3)Change	-		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Adđ			
Remove			·
6)Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	If amending or adding (Attach additional sheets	s, if necessary).	(Re specific)	STAL MALON		
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)						
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)						
(if not applicable, Indicate N/A)	- \					
(if not applicable, Indicate N/A)	,,,,,,,					
(if not applicable, Indicate N/A)	——————————————————————————————————————	<u></u>			······································	
(if not applicable, Indicate N/A)						
(if not applicable, Indicate N/A)					·- · · · · · · · · · · · · · · · · · ·	
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(if not applicable, Indicase N/A)						
(if not applicable, Indicase N/A)	If an amendment provi provisions for implem	ides for an exch coting the ame	ndment if not co	ition, or cancellat itsined in the am	ion of issued share endment itself:	₫.
	(if not applicable, i	Indicate N/A)				
	\					
						

	06/04/2015	
The date of each amendment!		if other than the
date this document was signed.		
Effective date If applicable:	06/04/2015	
Citective date il abiliticable:	(no mare than 90 days ofter amendment file date)	
	his block does not meet the applicable statutory flling requirements, this date with the Department of State's records.	ill not be listed us the
Adoption of Amendment(s)	(CHECK ONE)	
☐ 'The amendment(s) was/were by the shareholders was/were	a adopted by the shareholders. The number of votes east for the amendment(s) re sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amundment(s):	
"The number of votes	east for the amendment(s) was/were sufficient for approval	
by	·	
	(voting group)	
The amendment(s) was were action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated	04-2015	
Signature X	y a director, president or biher officer - if directors or officers have not been	_
	lected, by an incorporator – if in the hands of a receiver, trustee, or other court	
	pointed fiduciary by that fiduciary)	
• '	OLAVO G NETO	
	(Typed or printed name of person signing)	<u></u>
	PRESIDENT	
	(Title of person signing)	<u>,</u>