P09000071914

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A. RAMSEY SEP 1 4 2022

COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPOR	RATION:	ULTING SERVICES COR	p 			
DOCUMENT NUMI	P09000071914 BER:		 			
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all corres	spondence concerning this ma	tter to the following:				
	Andrea Escobar					
	Name of Contact Person					
	Firm/ Company 6301 Collins Ave UNIT 1606					
	Address MIAMI, FL 33141					
	City/ State and Zip Code ANDREA.VVENTURES@GMAILCOM					
	E-mail address; (to be us	sed for future annual report	notification)			
For further information	n concerning this matter, pleas	se call:				
ANDREA ESCOBAR		305 at (917.5988			
Name of Contact Person			de & Daytime Telephone Number			
Enclosed is a check fo	r 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)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

NO LIMIT CONSULTING SERVICES CORP.

	2022 JUN 21 PM 12 52
	tly filed with the Florida Dept. of State)
1209000071914	an dar production
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: NO LIMIT MANAGEMENT SERVICES INC.	The new
name must be distinguishable and contain the word "corporation," ' "Inc," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	845 W 46 ST
(Principal office address MUST BE A STREET ADDRESS)	Miami Beach, FL
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6301 Collins Ave UNIT 1606
	Miami Beach, FL 33141
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida si	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Signature of New I	Registered Agent, if changing
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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)

Example:

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>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>SV</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove 3) Change		_		
Add				<u>-</u>
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

	icles, enter change(s) here: (Be specific)
	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	
(if not applicable, indicate N/A)	

• ,

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
Effective date if applicable.	(no more than 90 days after amendment file do	ute)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirempartment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board of directors without share	reholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf-	oted by the shareholders. The number of votes cast for the ficient for approval.	amendment(s)
	roved by the shareholders through voting groups. <i>The followach voting group entitled to vote separately on the amenda</i>	
"The number of votes cast f l by	or the amendment(s) was/were sufficient for approval	
Dy	(voting group)	
selected appointe	rector, president or other officer – if directors or officers hat, by an incorporator – if in the hands of a receiver, trustee, and fiduciary by that fiduciary) Andrea Escobar	
-	(Typed or printed name of person signing) MANAGER	
	(Title of person signing)	