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Amend

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations Optimus Consulting Ginsup, Inc NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Heidi Uuranniemi Firm/ Company For further information concerning this matter, please call: teidi Uuranniemi Enclosed is a check for the following amount made payable to the Florida Department of State: **☑** \$35 Filing Fee **□\$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 Street Address** Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, PL 32301

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment	多一
to Articles of Incorporation	编集一
Option of Open Alice of	意る。
Optimus Consulting Gntup, Inc.  (Name of Corporation as currently filed with the Florida Dept. of State)	
P1100012272	1.50
(Document Number of Corporation (if known)	77.5°

as rations of medipolation.	
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "F	" "company," or "incorporated" or the abbreviation to". A professional corporation name must contain the P.A."
B. Enter new principal office address, if applicable:	7634 NW 6th AVE.
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Boca Raton, FL 33487
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7634 NW leth Ave.
(Manning address MAN DE MANOOT ON THOSE BOR	Boca Raton, FL 33487
D. If amending the registered agent and/or registered office addre	ss in Florida, enter the name of the
new registered agent and/or the new registered office address:	
	<u>anniem I</u>
7634 NW Leth	
(Florida stree	et address):
New Registered Office Address: BOCA Katu	, ritulida O J (O
	City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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	PT John I	<u>Doe</u>	
X Remove	<u>V</u> Mike	<u>lones</u>	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>VP</u>	Lenatanikainen	7634 NW 6th Ave.
Add			Boca Raton, FL 33487
Remove			
2) Change	5	Tuula Uuranniemi	7634 NW Let AUP, Boca Ration, F2 3348
<del></del>			1000010001112318
Remove			
Add		* · · · · · · · · · · · · · · · · · · ·	
Aud			
Kemove			
4) Change			<del> </del>
Add			
Remove			
5) Change	**************************************		
Add			
Remove			
6) Change	<del></del>	-	
Add			
Remove			

www.uaainonai	lding additional Article sheets, if necessary). (	Be specific)	<del></del>		
an amendment rovisions for in	provides for an exchan	ge, reclassification ment if not contair	a, or cancellation of	issued shares,	
(if not applica	able, indicate N/A)				
			·—·		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more nam so anys after anæranæri fræ aare)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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	
(voung group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 111816	
Signature	
(By a director, president or other officer - if directors or officers have not been	<del></del>
selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Veikko Vuonnen	
(Typed or printed name of person signing):	
President	
(Title of person signing)	