P11000067054

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TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: J DIAL PEO SALI	ES & CONSULTING INC			
DOCUMENT NUMB	ER: P11000067054				
The enclosed Articles (of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	JOHN DIAL				
		Name of Contact Person	1		
		Firm/ Company			
	3802 CROSSROADS PARK	WAY			
•	Address				
	FORT PIERCE, FL 34945				
•		City/ State and Zip Cod	c		
· john@	atlanticpayroll.us				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
John Dial		772 at (de & Daytime Telephone Number		
Name c	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
S35 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amene Divisio Cliftor	Address Iment Section on of Corporations a Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

J DIAL PEO SALES & CONSULTING INC

FILED

(Name of Corporation as currently	filed with the Florida Dept.	of State) 2018 NOV 20 PM 2: 22
P11000067054		
(Document Number of	Corporation (if known)	TALLAHASSEE, FL
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>E</i> its Articles of Incorporation:	Torida Profit Corporation ado	pts the following amendment(s) to
A. If amending name, enter the new name of the corporation: DIAL CONSULTING PARTNERS INC		211
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Cword "chartered," "professional association," or the abbreviation "I	λο". A professional corporati	The new uted" or the abbreviation on name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NIA	
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 address: Name of New Registered Agent Note: Name of New Registered Agent	ess in Florida, enter the name	of the
(Florida stre New Registered Office Address: N/A		·lorida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations o	of the position.
NA	rgistered 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.

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)	<u>Title</u>	Name N ()	Address
1) Change		NIA	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Change name from 2 Dial PEO Sales: Consulting Inc
Change name from 2 Dial PEO Sales: Consulting Inc to Dial Consulting Partners Inc
JO DIAN CONTRACTOR OF THE PROPERTY OF THE PROP
F. 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)

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(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 blo document's effective date on the Department.	ck does not meet the applicable statutory filing requirements, this date artment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopt by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statemen ach voting group entitled to vote separately on the amendment(s):	ı
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were adoptaction was not required.	ted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adoptaction was not required.	ted by the incorporators without shareholder action and shareholder	
Dated 11-13	-18	
Signature		
(By a dire selected,	ector president or other officer of directors or officers have not been by an incorporator of in the hands of a receiver, trustee, or other court diffiduciary by that fiduciary)	
](OHN DIAL	
	(Typed or printed name of person signing)	
P	RESIDENT	
	(Title of person signing)	