P11000100548

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(Re	equestor's Name)	
(Ac	ldress)	
(Ac	Idress)	
(Ci	ty/State/Zip/Phone	e #)
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none Charge Ornered.



8/9/14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: INTERNAT		SOLUTIONS INC
DOCUMENT NUMBER: P1100010054	8	
The enclosed Articles of Amendment and fee are sul	bmitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
MARCELA REST	REPO	
	Name of Contact Person	1
INTERNATIONAL	L GTECH SOLU	ITIONS INC
	Firm/ Company	_
8810 NW 24 TER	RACE	
	Address	
MIAMI, FL. 33172	2	
	City/ State and Zip Cod	e
MRESTREPO@KINI	VIESIS COM	
	sed for future annual report	notification)
i, man ada siin (tv i o di	and the factor and th	
For further information concerning this matter, pleas	se call:	
MARCELA RESTREPO	at (786	302-6162
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	artment of State:
■ \$35 Filing Fee	□\$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	Street	Address
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327		Building
Tallahassee, FL 32314	2661 E	Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

FILED. 2014 AUG 1 1 PM 4: 38

INTERNATIONAL GTECH SOLUTIONS INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P11000100548

(Document Number of Corporation (if known)

nent(s) to

INNESIS SOLUTIONS INC ne must be distinguishable and contain the orp" "Inc.," or Co" or the designation "or rd "chartered," "professional association," or	Corp," "Inc," or "Co". A profess		
Enter new principal office address, if applie			
incipal office address <u>MUST BE A STREET</u>			
	_ .		
Enter now mailing address if applicables	**************************************		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)		
If amending the registered agent and/or reg	pistered office address in Florida	enter the name	of the
new registered agent and/or the new registe			<u> </u>
Name of New Registered Agent			
Hane ty Hen Regimered Agent			
- Additional of the American Inches	(Florida street address)	_	
		, Florida	(Zin Code)
	(Florida street address) (City)	, Florida	(Zip Code)

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	$\underline{\mathbf{V}}$	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add Remove			
2) Change			
Add Remove			
3) Change			
Add			
4) Change			
Add Remove			
5) Change			
Add Remove			
6) Change			
Add			
Remove			

(
	If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)
-	
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	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 amendmen	t(s) adoption: <u>U8/01/2014</u>	, if other than the
date this document was signed	08/01/2014	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	ere adopted by the shareholders. The number of votes east for the amendment(s) were sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	es cast for the amendment(s) was/were sufficient for approval	
by:		
	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Dated 07/	31/2014 a	
Dated	Marda Cetup	
	By a director, president or other officer – if directors or officers have not been	
	selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	MARCELA RESTREPO	
	(Typed or printed name of person signing)	_
	PRESIDENT	
	(Title of person signing)	