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FILED SECRUTARY OF STATE TALLASSEE FORIDA

OCT = 9 2013 T. CARTER NOV. 1,2013

## **COVER LETTER**

TO: Amendment Section

**Division of Corporations** 

NAME OF CORPOR	ATION: Raj Verma	Consulting, Inc.		
DOCUMENT NUME	P 1200000	8389		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
		Rajesh Verma	a	
·		Name of Contact Person	1	
,	Firm/ Company			
	2901 W. Abiaca Circle			
	Address			
		Davie, FL 3332		
		City/ State and Zip Cod	e	
	Ra	ajvdavie@bellsoi	uth.net	
<del></del>	E-mail address: (to be us	sed for future annual report	notification)	
For further information	a concerning this matter, pleas	se call:		
Raje	esh Verma	at (954	, 448-9056	
Name o	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle assee, FL 32301	

## Articles of Amendment to Articles of Incorporation

FILED SECRETARY OF STATE TALLAMASSEE, FLORIDA

Raj Verma Consulting, Inc.

13 OCT -1 AH 10: 53

	Naj veriria Con		<del></del>
(Name of Corporation as			
	P 1200000	8389	
(Documer	nt Number of Corporation	(if known)	<del></del>
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new na	ame of the corporation;		
	Total Municipa	ll Solutions, Inc.	The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	on," "company," or "incorporated" or the "Co". A professional corporation name mus "P.A."	abbreviation t contain the
B. Enter new principal office address.	if annlicable:	10388 State Road 84	
(Principal office address MUST BE A S		Suite 112	_
		Davie FL 33324	<del>-</del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2901 W. Abiaca Circle	
		Davie FL 33328	<u> </u>
			_
D. If amending the registered agent ar new registered agent and/or the ne			
Name of New Registered Agent	N/A		
	(Florida s	treet address)	
N 0 : 100 111	N/A		
New Registered Office Address:	(Cit	y) , Florida	_
New Registered Agent's Signature, if c	hanging Registered Agen	ıt;	
		with and accept the obligations of the position	:
	CN 5		
Si	anature of New Registeres	ι Ασενι 11 CΝΛΙΝΟΊΝΟ	

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> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sally	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change	N/A	N/A	2901 W. Abiaca Circle
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change	<del></del>		
Add			
Remove			
5) Change			
Add	·		
Remove			
6) Change			
Add			
Remove			

(Attac	additional sheets, if necessary). (Be specific)	
N/A		
		<del>.</del>
<del> </del>		···
		-
		<del></del>
F. <u>If an</u> prov	amendment provides for an exchange, reclassification, or cancellation of issued shares, isions for implementing the amendment if not contained in the amendment itself: if not applicable, indicate N/A)	
N/A		
,,		
		·
<del></del> -		

The date of each amendmen		_, if other than the
date this document was signed Effective date if applicable:	November 1, 2013	
Enecuve date <u>ir applicable</u> :	(no more than 90 days after amendment file date)	···
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voiing group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_Se	eptember 26, 2013	
Signature		_
(E	By a director, president or other officer – if directors of officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	_
	Rajesh Verma	
	(Typed or printed name of person signing)	-
	Director	
	(Title of person signing)	_