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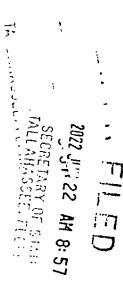
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Certified Copies	Certificates o	f Status
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Special Instructions to	Filing Officer:	
	J. HORNE	
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Office Use Only



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RECEIVED



April 7, 2022

TENILLE MOONASINGH 4500 FORBES BLVD SUITE 200 LANHAM, MD 20706 US

SUBJECT: I.M. TAXES & ACCOUNTING SERVICES INCORPORATED

Ref. Number: P13000001511

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a BENEFIT/ SOCIAL CORPORATION, but your entity is a PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Jasmine N Horne Regulatory Specialist II

Letter Number: 622A00008141

Response: Please rea my completed package.

These documents were forwarded to a new address which created a delay in receiving them. I can be reached on 407-680-6707 if needed.

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: T.M. Taxes	Accounting Services Incorporated
DOCUMENT NUMBER: P15000	
The enclosed Articles of Amendment and fee are sub	omitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Tenille	Moonesingh Name of Contact Person
Moon Advis	Sry Inc. Firm/Company
1573 Rutland	, ,
Hanover, MD	21076
info@te	City/ State and Zip Code
E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, pleas	e call:
Tenule Moonasingh Name of Contact Person	at (407) 600 6707 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certified Copy (Additional copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED 2022 JUN-22 - AM -8: 5-7

	poration as curren	tly filed with the Florida Dept. of State , Fat (1911)
P132000	01511	
		of Corporation (if known)
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of	f the corporation:	
Moon Advisory,	Inc.	The new
name must be distinguishable and contain the w	ord "corporation," "Inc," or "Co".	The new "company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word ."
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>		4500 Forbes Blvd. Surfe 200
		Larham, HD 20700
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)		1573 Rutland Way
		Hansver, MO 21076
D. If amending the registered agent and/or r		
new registered agent and/or the new regis		
new registered agent and/or the new registered Agent Name of New Registered Agent	NIA	
	NIA	treet address)
	NIA	treet address)
Name of New Registered Ayent	NJA (Florida s	treet address)
Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if changin	V A (Florida s N A ng Registered Ager	reet address), Florida (City) (Zip Code)
Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if changin	V A (Florida s N A ng Registered Ager	treet address), Florida (City) (Zip Code)
Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if changin	V A (Florida s N A ng Registered Ager	reet address), Florida (City) (Zip Code)

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> <u>Joh</u>	nn Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	NIA		
Add			
Remove			
2) Change	N/A_		
Add	•		
Remove 3) Remove	NA		
Add			
Remove	,		
4) Change	_A/A_		
Add			
Remove			
5) Change	N A_		
Add			
Remove			
6) Change	NA		
Add	•		
Remove			

Attach additional sheets, if necessary)		
NIA		
Ç.		
f an amendment provides for an ex provisions for implementing the an	hange, reclassification, or cance endment if not contained in the	Hation of issued shares, amendment itself:
(if not applicable, indicate N/A)		
N A		
•		
\$1.000 B. 10.00		

The date of each amendment(s) a date this document was signed.	adoption: 06 15 2022	, if other than the
Effective date <u>if applicable</u> :	06 15 2022	
meetive date in approcusie.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad action was not required.	lopted by the incorporators, or board of directors without shareholder acti	on and shareholder
The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendments	s)
by the shateholders was were s	11	
☐ The amendment(s) was/were ap must be separately provided for	oproved by the shareholders through voting groups. The following statem reach voting group entitled to vote separately on the amendment(s):	ent
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