

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	#)
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R. WHITE 00T 276 7013

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION:	TS CORP	
DOCUMENT NUM	BER:		
The enclosed Articles	of Amendment and fee are st	ibmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	JESUS CUE		
		Name of Contact Person	n
	WORLDWIDE BUSINESS	SOLUTION CORP	
		Firm/ Company	
	6915 SW 57 AVE SUITE 23	22	
		Address	
	SOUTH MIAMI, FL 33143		
		City/ State and Zip Cod	· ·
ICU)	E@W-BSC.COM		
	_	sed for future annual report	natitivation
	13 11011 11011 1101 110 110 110 110 110	sed to tatale aimain report	notification)
For further information	n concerning this matter, pleas	se call:	
JESUS CUE		at (803-7777
Name of Contact Person Area Code & Da		de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	irtment of State:
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

les of Incorporation FILED

ELITE PAYMENTS CORP (Name of Corporation as currently filed with the Florida Dept. of P14000047991 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (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.

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	JOSE A BENITEZ JR.	1955 NW 183 TR
X Add			PEMBROKE PINES, FL 33029
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change		_	
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
			
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If an amendment provides for an exch	ange reclassification or o	cancellation of issued sha	Tes
provisions for implementing the ame	idment if not contained in	the amendment itself:	<u>11 C.3.3</u>
(if not applicable, indicate N/A)		<u> </u>	
		···	
.			
	<u> </u>		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date w document's effective date on the Department of State's records.	rill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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	
(voting 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	
(By 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 figuriary by that fiduciary)	
JOSE A BENITEZ III	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)