## PHD00052396

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JUN 2 5 2014

C. CARROTHERS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: ZA SOLUT	IONS INC	
DOCUMENT NUMI	BER: P1400005239	96	
	of Amendment and fee are su		
Please return all corre	spondence concerning this ma	tter to the following:	
	ZIV ARNA		
		Name of Contact Person	n
	ZA SOLUTIONS	INC	
		Firm/ Company	
	21024 NE 34TH	COURT	
		Address	
	AVENTURA, FL	33180	
	·- ·	City/ State and Zip Cod	e
zive	672@yahoo.com		
		sed for future annual report	notification)
	·	•	•
For further information	n concerning this matter, pleas	se call:	
ZIV ARNA		at (718	、825-7646
Name o	of Contact Person		de & Daytime Telephone Number
		Tireu eo	de de 15dy time Telephone Tumber
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment 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)
<u>Mai</u>	ling Address	Street	Address
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
	. Box 6327 ahassee, FL 32314		Building Executive Center Circle
1 2113	anassee, FL 32314	2001 E	xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## ZA SOLUTIONS INC

ZA SOLUTIONS INC			
(Name of Corporation as current)	<u>ly filed with the Florida Dept</u>	., of State)	70.5
P14000052396			
(Document Number	r of Corporation (if known)		2015 JUN 16
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this <i>Florida Pro</i>	fit Corporation adopts the following	g amendment(s) 40.
A. If amending name, enter the new name of the	e corporation;		The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp," "Inc," or "Co". A pro	nny," or "incorporated" or the ab	breviation
B. Enter new principal office address, if applica (Principal office address <u>MUST BE A STREET A</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u> )		
D. If amending the registered agent and/or reginew registered agent and/or the new register		da, enter the name of the	
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	
-	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen	nt. I am familiar with and acc		
Signature o	f New Registered Agent, if cha	ngung	

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.

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>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	SHAHAR GOLDBOIM	19520 NE 19TH CT
Add			NORTH MIAMI BEACH
Remove			FL 33179
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Articular additional sheets, if necessary).	(Be specific)	
		···
		<u> </u>
<u> </u>		
f an amendment provides for an exch		
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amen	<u>lment itself:</u>

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	<del></del>
Effective date if applicable:	
(no more than 90 days after amendment file date)	_
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast 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.	
05/4/2015	
Dated	
Signature	
(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)	_
ZIV ARNA	
(Typed or printed name of person signing)	-
PRESIDENT	
(Title of person signing)	_

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