# P14000060779

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Andvaris Inc		- 4+ <del></del>		
DOCUMENT NUMB	P1.4000060779				
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	Zedrick Gilo Roca				
-		Name of Contact Persor			
	Andvaris Inc				
-		Firm/ Company			
	5959 Blue Lagoon Dr 102				
-	Address				
	Miami, FL 33126				
-	· <b>-</b>	City/ State and Zip Code	•		
	billing@andvaris.com				
-	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, plea	se call:			
701 1011101	ton thing the matter, pres				
Zedrick Gilo Roca		at (			
Name of Contact Person		Area Code & Daytime Telephone Number			
Enclosed is a check for	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)	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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

#### Articles of Amendment to Articles of Incorporation of

FILED

ANDVARIS VIRTUAL SOLUTIONS INC. (Name of Corporation as currently filed with the Florida Dept. of State SECRETARY OF STATE (Document Number of Corporation (if known ALLAHASSEE, FL P14000060779 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: Andvaris, Inc. The new 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) \_\_\_\_\_\_. Florida New Registered Office Address: (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

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)

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 PT John Doe X Remove V Mike Jones SVSally Smith <u>X</u> Add Type of Action Address Title <u>Name</u> (Check One) 3406 Dover Road D Barry Solomon 1) \_\_ Change Pompano Beach, Florida 33062 Add \_\_\_\_ Remove 2) \_\_\_\_ Change \_\_\_\_ Add Remove 3 ) Change \_\_\_ Add Remove 4) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove 5) Change Add \_\_\_\_\_Remove 6) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove

(Attach additional sheets, if necessary). (Be specific)	
rticle IV: The number of shares the corporation is authorized to issue is 10,000.	
	<del></del>
	<del>-</del>
	. ,
	<del></del>
	<del></del>
If an amendment provides for an exchange, reclassification, or cancellation of issue	ed shares.
provisions for implementing the amendment if not contained in the amendment it	self:
(if not applicable, indicate N/A)	<del></del>
	·
	- ···

	3/4/2021	Se cale in all in all in
The date of each amendment(s) date this document was signed.	adoption:	if other than the
Effective date <u>if applicable</u> :		
	tno more than 90 days after amendment file	date)
Note: If the date inserted in this document's effective date on the f	block does not meet the applicable statutory filing require Department of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sh	areholder action and shareholder
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for th sufficient for approval.	e amendment(s)
	oproved by the shareholders through voting groups. <i>The fol reach voting group entitled to vote separately on the amen</i>	
	t for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
3/4/2021		
Dated	Δ	
Signature	<del></del>	
(By a select	director, president or other officer – if directors or officers led, by an incorporator – if in the hands of a receiver, trusteented fiduciary by that fiduciary)	
	Zedrick Gilo Roca	
	(Typed or printed name of person signing)	······································
	Shareholder/ Director/ President	
	(Title of person signing)	



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## FLORIDA DEPARTMENT OF STATE 2821 JUN 14 PM 1:29 Division of Corporations

Letter Number: 521A00010986

May 24, 2021

ZEDRICK GILO ROCA ANDVARIS VIRTUAL SOLUTIONS INC. 5959 BLUE LAGOON DR. SUITE 102 MIAMI, FL 33126 US

SUBJECT: ADVARIS VIRTUAL SOLUTIONS INC

Ref. Number: W21000074521

We have received your document for ADVARIS VIRTUAL SOLUTIONS INC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

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.

Anissa Butler Regulatory Specialist II

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