P14000074128

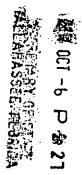
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: TAX AND IMMIC	GRATION SOLUTIONS I	NC
DOCUMENT NUMB			
	f Amendment and fee are su	abmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
1	NAGIB N. BALTAGI		
_		Name of Contact Person	n
-		Firm/ Company	
1	4375 NW 2ND AVENUE		
_		Address	
ת	MIAMI, FL 33168		
_		City/ State and Zip Cod	e
NAGII	352283@AOL.COM		
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
NAGIB N. BALTAGI		at (512-3514
Name of	Contact Person	Area Code & Daytime Telephone Num	
Enclosed is a check for	the following amount made	payable to the Florida Depo	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)
Amer Divis P.O. 1	ng Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amenc Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

TAX AND IMMIGRATION SOLUTION			
	of Corporation as currently	filed with the Florida De	pt. of State)
P14000074128	41N	6	
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit Corporation	adopts the following amendment(s)
A. If amending name, enter the new na	ame of the corporation:		
name must be distinguishable and con "Corp" "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "(Co". A professional corpo	
B. Enter new principal office address, if applicable:		1140 WEST 50TH STRE	EET STE 304
(Principal office address MUST BE A S		HIALEAH, FL 33012	
			_
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		14375 NW 2ND AVENUE	
		MIAMI, FL 33168	
D. If amending the registered agent ar new registered agent and/or the ne			ame of the
Name of New Registered Agent	NAGIB N. BALTAGI		
Name of the windsmeren rigem	14375 NW 2ND AVENUE		
	(Florida stre	et address)	
New Registered Office Address:	MIAMI		, Florida 33168
		Cùy)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the obligatio	ons of the psition.
	Signature of New Ro	rgistered 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> </u>	<u>John Doe</u>		
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>	Address	
1) Change	P	CECILIA M FERNANDEZ	6195 WEST 18TH AVE	
Add			HIALEAH, FL 33012	
X Remove			G201	
2) Change	P	NAGIB N BALTAGI	14375 NW 2ND AVENUE	
X Add			MIAMI, FL 33168	
Remove	VP	SEAN-MICHAEL K BALTAGI	14735 NE 11TH CT	
3) Change X Add	* 1	— SEAN MICHAEL R BALTACH	NORTH MIAMI, FL 33161	
Remove				
4) Change	VP	KATIUSKA MERINO	25060 SW 125TH CT	
X Add			HOMESTEAD, FL 33032	
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	
		<u>.</u>
	₩ .	
		MA.
<u>.</u>		
f an amendment provides for an excl	nange, reclassification, or cancellation of issued shares,	
<u>provisions for implementing the ame</u> (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
		· ·
	·	

The date of each amendmen date this document was signed		, if other than the
Effective date if applicable:	SEPTEMBER 1ST, 2017	
in apprendix.	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date he Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	re adopted by the shareholders. The number of votes east 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):	
"The number of vote	s east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated	9/30/17	
Signature _	7/20/17 Thik Balki:	
(I s	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	PEXTIDENT	
	(Title of person signing)	