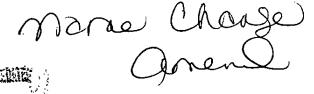
P15000021739

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(Business Entity Name)
(Document Number)
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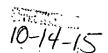
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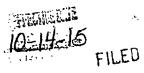
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION

NAME OF COR	PORATION: WINGGISTIC SO	LUTIONS CORP.			
DOCUMENT NU	P15000021739				
The enclosed Artic	cles of Amendment and fee are su	bmitted for filing.			
Please return all co	orrespondence concerning this man	tter to the following:			
	Winston Calvo				
		Name of Contact Person			
	WINGISTIC SOLUTIONS GROUP, INC.				
	 	Firm/ Company			
	8335 SW 72nd Ave, Apt 309	D			
		Address			
	Miami, FL 33143				
		City/ State and Zip Code			
W	inscal@hotmail.com				
_	_	ed for future annual report	notification)		
	,	•	·		
For further inform	ation concerning this matter, pleas	e call:			
Winston Calvo		at (479-5824		
Na	me of Contact Person		le & Daytime Telephone Number		
Enclosed is a chec	k for the following amount made p	payable to the Florida Depar	rtment of State:		
S35 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)		
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314	Amendi Division Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301		

Articles of Amendment Articles of Incorporation of



2018 MCT -5 PM 1: 20

(Name o		SAID OCT
(1144110-0	f Corporation as curren	tly filed with the Florida Dept. of State)
15000021739		tly filed with the Florida Dept. of State) FLORIDA
	(Document Number	of Corporation (if known)
ursuant to the provisions of section 607.	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s
. If amending name, enter the new na	me of the corporation:	
VINGISTIC SOLUTIONS GROUP, INC	3 .	The new
	ation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
. Enter new principal office address, i	if applicable:	8335 SW 72nd Ave, Apt 309D
Principal office address <u>MUST BE A ST</u>		Miami, FL 33143
(Mailing address <u>MAY BE A POST C</u>	<u>MPRCE BOX</u>)	
		dress in Florida, enter the name of the
. If amending the registered agent and new registered agent and/or the new	v registered office addres	
new registered agent and/or the new	v registered office addres	
new registered agent and/or the new	v registered office addres	
new registered agent and/or the new	v registered office addres	555:

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change		N/A	N/A
Add			
Remove			
2) Change		N/A	N/A
Add			
Remove			
3) Change		N/A	N/A
Add			
Remove			
4) Change		N/A	N/A
Add			
Remove			
5) Change		N/A	N/A
Add			
Remove			
6) Change		N/A	N/A
Add			
Remove			

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) N/A	E. If amending or adding additional Arti (Attach additional sheets, if necessary).	<u>cles, enter change(s) here</u> : (Be specific)
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	N/A	•
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(if not applicable, indicate N/A)	F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
N/A	(if not applicable, indicate N/A)	nament it lot contained in the unionaliteit when
	N/A	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
	0/14/2015	
Effective date <u>if applicable</u> : _	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	is block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
09/25/20 Dated	015 Man # 1	
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Winston Calvo	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	