## P15000047817

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	<u> </u>
(Ci	ty/State/Zip/Phone	-#1
(OII	.,, otato, zipri none	
PICK-UP	☐ WAIT	MAIL
(0)	ısiness Entity Nan	
ua)	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





300353400143

10/13/20--01019--026 \*\*35.00

NOV 18 2020 I ALBRITTON

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MANAGEMENT	SOLUTIONS OF TAMPA, INC
DOCUMENT NUMBER: P15000047817	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	natter to the following:
CHRISTINE MOHAMME	ED
	Name of Contact Person
MANAGEMENT SOLUT	IONS OF TAMPA, INC
	Firm/ Company
3302 W CYPRESS STREI	ET SUITE 107
	Address
TAMPA, FL 33607	
	City/ State and Zip Code
CM.MSTINC@GMAIL.C	COM
	used for future annual report notification)
For further information concerning this matter, ple	ease call:
DALE TWARDOWSKI	at (727 ) 748-8954
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
■ \$35 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed)  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

MANAGEMENT SOLUTIONS OF TAMPA, INC.

(Name of Corporation	ion as currently	filed with the Florida D	ept, of State)	
P05000047817				
(Docun	nent Number of 0	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Floridates Articles of Incorporation:	a Statutes, this $oldsymbol{F}_0$	lorida Profit Corporatio	n adopts the following	amendment(s) to
A. If amending name, enter the new name of the co	orporation:			
N/Λ				The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbre	" or "Co". A	mpany," or "incorporate professional corporation	ed" or the abbreviation	"Corp.,"
B. Enter new principal office address, if applicable:		N/A		
(Principal office address MUST BE A STREET ADI				<del></del>
				<del></del>
C. Enter new mailing address, if applicable:		N/A		•
(Mailing address MAY BE A POST OFFICE BOX)				<del></del>
				· ?
				25
D. If amending the registered agent and/or registe	ered office addre	ss in Florida, enter the	name of the	
new registered agent and/or the new registered				
Name of New Registered Agent N/A				
<del></del>	(Florida stree	et address)		
New Registered Office Address:			, Florida	
New Registereu Office Address.		City)	Zip Ce	nle)
New Registered Agent's Signature, if changing Registeredy accept the appointment as registered agent.		ith and accept the obline	tions of the position	
тиетелу ассерстве арронитет аз гедметей адет.	rum jannaar w	an and accept the omiga	noms by the position.	
		<u> </u>		
Sign	nature of New Reg	gistered Agent, if changi	ng	
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	<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	RIADH D SOOKOOR	3302 W CYPRESS STREET
Add		<del></del>	SUITE 107
X Remove			TAMPA, FL 33607
2) Change	P	VISHWANATH R WOODS	1362 SLEEPY HOLLOW CT
X Add	-		DUNEDIN, FL 34698
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<u></u>	_	
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific) N/A	
. 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	

. .

•

	OCTOBER 1, 2020	
The date of each amendment(s	) adoption:	, if other than the
date this document was signed.	vervanen i 2020	
• Effective date if <u>applicable</u> :	CTOBER 1,2020	
	(no more than 90 days after ame)	ndment file date)
Note: If the date inserted in the document's effective date on the		ling requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors	s without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes sufficient for approval.	s cast for the amendment(s)
	approved by the shareholders through voting grouf for each voting group entitled to vote separately of	
"The number of votes o	ast for the amendment(s) was/were sufficient for a	ipproval
by		
	(voting group)	
OCTOR	ER 6, 2020	
DatedSignature	Buch Sooken	
(By sele	a director, president or other officer – if directors of the directors of	
	RIADH SOOKOOR	
	(Typed or printed name of person s	igning)
	PRESIDENT	
	(Title of person signing)	