P15000056584

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: POUSTINCHIAN	CONSULTANT ENGINE	ERS, INC.
DOCUMENT NUM	BER: P15000056584		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Mark Poustinchian		
		Name of Contact Persor	
	Poustinchian Consultants, Inc		•
	Toustmentan Consultants, Inc		
		Firm/ Company	
	2017 Castelli Blvd		
		Address	
	Mount Dora, Florida, 32757	!	
	-	City/ State and Zip Code	
_			
m@r	oustinchian.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further informatio	n concerning this matter, pleas	e call:	
Mark Poustinchian		805 at () 709-6952 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	rtment 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)
Amo Div P.O.	endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

COMPANY (NAME CHANGE ONLY)

Articles of Amendment to Articles of Incorporation of

POUSTINCHIAN CONSULTANT ENGINEERS INC

TOOSTINCHIAN CONSOLITANT ENGINEERS, INC.	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P15000056584	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this aits Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
POUSTINCHIAN CONSULTANTS, INC.	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
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: Name of New Registered Agent	
(Florida stre	ret address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	egistered 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.

<u>X</u> Change	<u>PT</u>	John Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jos	<u>nes</u>		
X Add	<u>sv</u>	Sally Sm	<u>iith</u>		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change				_	
Add					
Remove					
2) Change		_		_	
Add					
Remove					
3) Change		_		_	
Add					
Remove					
4) Change		_		.	
Add					
Remove					
5) Change		_		_	
Add					
Remove					
C Cl					
6) Change				-	
Add					
Remove					

. 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)	(Attach a	ding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
provisions for implementing the amendment if not contained in the amendment itself:		
provisions for implementing the amendment if not contained in the amendment itself:	· · · · · · · · · · · · · · · · · · ·	
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	provisi	ons for implementing the amendment if not contained in the amendment itself:

	on:		- F itit	other	than the
date this document was signed. '		9998 DIVISIO	ETARY MOF G	OF S Dripo!	TATE RATIONS
Effective date <u>if applicable</u> :					
	(no more than 90 days after amendment file date)	15 JU	L 27	PĦ	1:27
Note: If the date inserted in this block document's effective date on the Departr	does not meet the applicable statutory filing requirements, nent of State's records.	this date w	ill not l	ne list	ed as the
Adoption of Amendment(s)	(CHECK ONE)				
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendant for approval.	dment(s)			
☐ The amendment(s) was/were approve must be separately provided for each	d by the shareholders through voting groups. The following a voting group entitled to vote separately on the amendment(statement (s):			
"The number of votes cast for the	ne amendment(s) was/were sufficient for approval				
by	(voting group)				
	(voting group)				
action was not required.	by the board of directors without shareholder action and sha by the incorporators without shareholder action and shareho				
action was not required.	of the moorporators without shareholder action and shareholder				
7/22/2015 Dated					
Dated	7 2 = -				
Signature//	pen .				
selected, by	or, president or other officer – if directors or officers have no an incorporator – if in the hands of a receiver, trustee, or oth duciary by that fiduciary)		*		
MA	RK POUSTINCHIAN				
<u> </u>	(Typed or printed name of person signing)				
PRE	SIDENT				
	(Title of person signing)				