Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : ICONNECT SOLUTIONS CORP

Account Number : I20190000122 Phone : (407)863-0096 Fax Number : (407)612-2181

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

COR AMND/RESTATE/CORRECT OR O/D RESIGN FLORIDA CENTER SERVICE, CORP

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4/20/2022

TO: Amendment Section

From: EMERSON CORR

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COVER LETTER

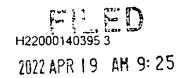
Division of Co	orporations
NAME OF CORP	PORATION: FLORIDA CENTER SERVICE, CORP
DOCUMENT NU	IMBER: P16000025264
The enclosed Artic	cles of Amendment and fee are submitted for filing.
Please return all co	orrespondence concerning this matter to the following:
	EMERSON CORREA
	Name of Contact Person
	ICONNECT SOLUTIONS CORP
	Firm/ Company
	6735 CONROY ROAD STE 309
	Address
	ORLANDO, FL 32835
	City/ State and Zip Code
	CONTACT@ICONNECTSC.COM
	E-mail address: (to be used for future annual report notification)
For further informa	nation concerning this matter, please call:
EMERSON CORE	REA 407 863 0096
Nat	me of Contact Person Area Code & Daytime Telephone Number

(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



Articles of Incorporation of FLORIDA CENTER SERVICE, CORP

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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FLORIDA CENTER SERVICE, CORP		· ·	LU. SIATE
(Name of Corporation as currently	filed with the Florida Dep	ı. of State) av.	TISSEE, FU
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Torida Profit Corporation ac	dopts the follow	ing amendment(s) to
A. If amending name, enter the new name of the corporation;			
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" professional corporation n	or the abbrevia ame must cont	The new ition "Corp.," ain the word
B. Enter new principal office address, if applicable; (Principal office address <u>MUST BE A STREET ADDRESS</u>)			
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 new registered agent and/or the new registered office address	ress in Florida, enter the na	me of the	
Name of New Registered Agent			_
tFlorida stre	et address)		_
New Registered Office Address:	(Cuy)	_, Florida (Zi	ip 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 obligation	is of the position	ч.
Signature of New Ro	egistered Agent, if changing		
Check if applicable			

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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:

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P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CF() = 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>Y</u> 2	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Address</u>
t) Change	DIR	VICTOR DE PAULA LOPES	12892 STRODE LANE
X Add			WINDERMERE, FL 34786
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5/ Change			
Add			
Remove			
6) Change			
Add			
Remove			

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If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	H22000140395 3
<u> </u>		
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<u> </u>		
If an amendment provides for an exc	hange, reclassification, o	r cancellation of issued shares.
provisions for implementing the amo (if not applicable, indicate N/A)	endment if not contained	in the amendment itself:
(ц погаррисате, такае ком)		
		<u> </u>
		200

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	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90) days after amena	ment file date)
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing partment of State's records.	ng requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors of	without shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes afficient for approval.	east for the amendment(s)
■ The amendment(s) was/were approvided for must be separately provided for	proved by the shareholders through voting group each voting group entitled to vote separately on	s. The following statement the amendment(s):
"The number of votes east	for the amendment(s) was/were sufficient for ap	proval
by	(voting group)	·"
	(voting group)	
APRIL 18,	2022	
Dated	Kaline paula Marar	h o
selecte	irector, president or other officer - if directors of d, by an incorporator - if in the hands of a receive ted fiduciary by that fiduciary)	officers have not been
	KALINE PAUL	A MARANHAO
	(Typed or printed name of person sig	gning)
	VP	
	(Title of person signing)	