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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : TAP SOLUTIONS INC Account Number : I20210000103

Phone : (786)615-3057 Fax Number : (786)615-3058

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

## COR AMND/RESTATE/CORRECT OR O/D RESIGN LELE2 CORP

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Electronic Filing Menu

Corporate Filing Menu

O SIMMANS

## Articles of Amendment to Articles of Incorporation of

•

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

(n	
LELE2 CORP	
(Name of Corporation as currently	filed with the Florida Dept. of State)
217000088938	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607, 1006, Florida Statutes, this F	Charles Brafit Comparation adopts the following amendments:
ts Articles of Incorporation:	torium Projet Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation;	
A any noting nature, enter the new name of the corporation,	
	The new
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 or the abbreviation. Corp., professional corporation name must contain the word
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 addr-	
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florido stre	et address)
New Registered Office Address:	. Florida
	City) (Zip Code)
•	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the northing
nerely accept the appointment as registered agent. I am jumitar w	un and accept the boughtons of the position.
Signature of New Re	gistered Agent, if changing
Check if applicable	

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.

X Change	<u>PT</u>	John Doe				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>\$V</u>	Şally Sr	nith			
Type of Action (Check One)	Title		<u> Мите</u>	Address		
1) X Change	P	_	JORGELINA G SOMMA	250 180TH DR UNIT 352		
Add				SUNNY ISLES BEACH, FL		
Remove				33160		
2) Change	PT		JULIAN GALLONE SOMMA	250 180TH DR UNIT 352		
Add		_		SUNNY ISLES BEACH, FL		
X Remove 3) Change				33160		
Add						
Remove						
4) Change						
Add						
Remove				<u> </u>		
5) Change		<del></del>				
Add						
Remove						
6) Change		_				
Add						
Remove						

(Attuc	ending or adding additional Articles, enter change(s) here: In additional sheets, if necessary). (Be specific)
<u> </u>	
-	
·	
lf an	amendment provides for an exchange, reclassification, or cancellation of issued shares,
<u>pr. v</u>	isions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption:, if other	than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste document's effective date on the Department of State's records.	d as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
03/17/2022 Dated	
Signature / Manage Miller	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
JORGELINA G SOMMA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	