## P17000089402

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

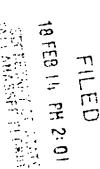
Office Use Only



400309007204

02/14/18--01012--023 \*\*35.00

S TALLENT FEB 1 5 2018



Kmend

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: COHSAN CONSU	JLTING GROUP CORP				
DOCUMENT NUM	P17000080402					
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.				
Please return all corr	respondence concerning this ma	itter to the following:				
	Albert Corrada					
	Name of Contact Person					
	Albert Corrada CPA					
		Firm/ Company				
	2655 LeJeune Road Suite 90					
	Address					
	Coral Gables, FL 33134					
		City/ State and Zip Cod	le			
aco	rrada@corradacpa.com		,			
	E-mail address: (to be us	sed for future annual report	notification)			
For further informati	ion concerning this matter, pleas	se call:				
Albert Corrada		at ( 305	804-8569			
Name	e of Contact Person	at ( ) Area Code & Daytime Telephone Number				
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:			
S35 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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amenc Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## COLISAN CONSULTING GROUP CORP

(Name of Corporation	as currently filed with the Florida Dept, of State)
P17000089402	
(Documer	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:
	Thenew
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	<u>ESS</u> )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	. 第三十
(maining address SIAT BE A POST OFFICE BOA)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist	ered Agent:
t nereny accept the appointment as registered agent. 1 c	un familiar with and accept the obligations of the position.
	The state of the s
Signati	ure of New Registered 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.

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
1) Change	P	ALBERTO E SANCHEZ FARIA	10175 COLLINS AV, APT 1505
Add X Remove			BAL HARBOUR, FL 33154
2) X Change	P	MAURY COHEN	10175 COLLINS AV, APT 1505
Add			BAL HARBOUR, FL 33154
Remove			
3 ) Change			
Add			
Remove			<del></del>
4) Change			
Add			
Remove			
5) Change			<del></del>
Add			
Remove			
6) Change	-		
Add			
Remove			

If amending or adding additional Art Attach additional sheets, if necessary).	. (Be specific)
•	
f an amendment provides for an excl	change, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
-	
<del>"</del>	

	02/01/2018	
The date of each amendment(s) a	idoption:	, if other than the
date this document was signed.	01 (2018	
Effective date if applicable:	01/2018	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date vepartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes case	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	
notion was not required.		
02/0 <del>9</del> /2013 Dated	3	
Signature	Many Ce	
selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	MAURY COHEN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	