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COVER LETTER

TO: Amendment Se Division of Cor			1
NAME OF CORPO	ORATION: VCS Solutions Inc		,
	IBER: P17000101775		
The enclosed Article	es of Amendment and fee are sul	bmitted for filing.	
Please return all corr	respondence concerning this mat	ter to the following:	
	Vikas Garg		
	<u> </u>	Name of Contact Person	
	VG CPA PC		1
		Firm/ Company	
	44790 Maynard Sq Ste 190		
		Address	, <u> </u>
	Ashburn VA 20147		
		City/ State and Zip Code)
ves	solution@vgcpapc.com		
		ed for future annual report	notification)
For further informati	on concerning this matter, pleas	e call:	
Vikas Garg		at (at ()
Name	e of Contact Person		le & Daytime Telephone Number
Enclosed is a check	for 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

(<u>Name (</u>	of Corporation as curren	tly filed with the Flo	orida Dept. of State	2)
VCS Solutions Inc., P17000101775				
	(Document Number	of Corporation (if kn	own)	
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corp	noration adopts the	following amendment(s)
A. If amending name, enter the new na	me of the corporation:		1	
VCS Solution Inc.				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A profession		or the abbreviation
3. Enter new principal office address, Principal office address MUST BE A S		N/A	!	
	, index (Northest)		i	
Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A		18
				FIL.
. If amending the registered agent an new registered agent and/or the new			er the name of the	E D
•	N/A			2: 3 아이
Name of New Registered Agent				ω
		treet address)	4	
New Registered Office Address:	N/A			
		(City)		(Zip Code)
ew Registered Agent's Signature, if cl hereby accept the appointment as regist	nanging Registered Ager ered agent. I am familian	nt: with and accept the	obligations of the po	osition.
	N/A			
	Signature of New	Registered Agent, if a	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> <u>John I</u>	<u>Doc</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	President	Dhirajlal Thakkar	2637 E. Atlantic Blvd.
Add			STE 30934
X Remove			Pompano Beach, FL 33062
2) Change	President	Dhirajlal Thakker	2637 E. A'tlantic Blvd,
$\frac{X}{X}$ Add			STE 30934
Remove			Pompano Beach, FL 33062
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			 "
5) Change			
Add			
Remove			

Attach additional sheets, if necessary). (Be specific)	
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if an amendment provides for an exchange, reclassification, or cancellation provisions for implementing the amendment if not contained in the amen	n of issued shares, dment itself:
(if not applicable, indicate N/A)	
<u> </u>	- <u>-</u>
	1
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•	December 29, 2017	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	December 29, £017	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date) +	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will Department of State's records.	l not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
12/29/2	017	
Dated		
	Mi alek	
Signature	Thurt	
	a director, president or other officer – if directors or officers have not been	
	ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	DHIRAJLAL THAKKER	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	_
	LEBR. OF DETROIT MYTHING	