P180000 11503

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SECRETARY OF STATE

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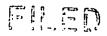
3/31/21

COVER LETTER

TO: Amendment Section Division of Corporations

·			202.	بن: ;
NAME OF CORPO	RATION: CDP Consulting Se	ervices Inc		
	BER: P18000011503			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Patty E Mason			
		Name of Contact Persor	1	
		Firm/ Company	<u> </u>	
	1003 Nathan Ridge Road			
		Address		
	Clermont, FL 34715			
		City/ State and Zip Code	£	
	patty@masoneas.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
Patty E Mason		at (⁴⁰⁷	488-3706	
Name	of Contact Person	Area Co	de & Daytime Telephone Nun	nber
Enclosed is a check fe	or the following amount made	payable to the Florida Depa	urtment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		ı

Articles of Amendment to Articles of Incorporation of



CDP Consulting Services Inc

2021 FEB 10 PH 6: 1,3

(Name of Corporation as currently	filed with the Florida Dept. of State)
P18000011503	SECRETARY OF STATE WALLANGSER, FI
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: CDPAM CONSULTING SERVICES INC	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.,"
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 registered agent and/or the new registered office address: Name of New Registered Agent	
Name of New Registered Agem	
(Florida stre	et address)
New Registered Office Address:	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	gistered Agent, if changing
Check if applicable	

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

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)	Title	Name	Address
1) Change			
Add			
Remove			
2) Change		-	
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			-
Remove			
6) Change			
Add			
Remove			

(Attach a	aditional sheets, į	if necessary). (I	Be specific)			
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. If an am	endment provida	es for an exchan	ve reclassificat	ion or cancellat	ian of issued shar	os.
provisio	o <mark>ns for impleme</mark> n not applicable, inc	nting the amendr	nent if not con	tained in the amo	ion of issued shar endment itself:	<u></u>
(9 /	ил аррисале, т	meme NA)				
				 		
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The date of each amendmen		, if other than the
date this document was signed	February 1, 2021	
Effective date <u>if applicable</u> :	· · · · · · · · · · · · · · · · · · ·	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date with Department of State's records.	rill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/we action was not required.	ere adopted by the incorporators, or board of directors without shareholder action a	nd shareholder
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	es cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Fehru	uary 1, 2021	
Dated	1	
	LAHITE Man	
Signature	By a director, president of other officer – if directors or officers have not been	
	selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
aj	appointed fiduciary by that fiduciary)	
	Patty E Mason	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	