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

NAME OF CORPORATION: DOCUMENT NUMBER: 21 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Division of Corporations

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 of | | |
| ()S(Solutions INC. | | |
| (Name of Corporation as currently filed with the Florida Dept. of State) | | |
| P18000 17724 | | |
| (Document Number of Corporation (if known) | | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amen its Articles of Incorporation: | dmenti | (s) to |
| A. If amending name, enter the new name of the corporation: | | |
| The | new | |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevia "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A." | tion | |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) SINE 195 PINCHOST FL | _ | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) SONI GS CEASE 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 18 HAR | |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent | 13 PH 2: | ILED |
| | 1 | |
| (Florida street address) | | |
| | | |
| New Registered Office Address:, Florida | | |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. | | |
| Signature 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 Doc | |
|-------------------------------|-----------|--------------|-------------------------|
| X Remove | <u>V</u> | Mike Jones | |
| X Add | <u>SV</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | 4_ | DAVID HARRIS | 6473 SW |
| Add | | | 2th St Mcm, Fl 33/40 |
| Remove | | | 1100011100011 |
| 2)Change | 2 | Ryan Jo | 83XXXXX |
| Add | | bonzalez | |
| Remove | | | 33 VOR XXX |
| 3) Change | | | 11+675 |
| Add | | | Dixie thishway |
| Remove | | | suite 195 |
| | | | ANECROST, FZ 33156 |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| Attach additional shee | ng additional Articles | | • | |
|---|------------------------|---------------------------------------|------------------------|---------------|
| | ets, if necessary). (B | Be specific) | | |
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| | ovides for an exchang | <u>ee, reclassification, or</u> | n the amendment itself | <u>nares.</u> |
| If an amendment pro | entering the amendi | nene ii not contained i | n the amendanche nach | <u> </u> |
| provisions for imple | le indicate N/41 | | | |
| If an amendment pro- provisions for imple (if not applicable) | le, indicate N/A) | | | |
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| provisions for imple | le, indicate N/A) | | | |

| The datesof each amendment(s) adoption: | , if other than the |
|--|-----------------------------|
| · 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 dat document's effective date on the Department of State's records. | e will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast 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): | nt |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by | |
| (voting group) | |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required. | г |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. | |
| Dated 3.13.19 | |
| Signature | |
| (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) | t |
| SARRINA DRIZA | |
| (Typed or printed name of person signing) | |
| Woldertor | |
| (Title of person signing) | |