P18000075886

(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:
<u></u>





500370488115

07/30/21--01013--010 **35.00

32 T. 1:26

R. W. (*)

COVER LETTER

TO: Amendment Section Division of Corporations

	NETFORCEINC						
NAME OF CORPORATION:P18000075886							
DOCUMENT NUMBER:							
The enclosed Articles of Amendment and fee are submitted for filling.							
Please return all corres	spondence concerning this mat	ter to the following:					
	GABRIELA MOTORGA						
	Name of Contact Person						
	Firm/ Company						
	2291 LAKE WOODBERRY (
	Address BRANDON, FL 33510						
		City/ State and Zip Code	2				
	gabrielamotorga@hotmail.com	n					
	E-mail address: (to be us	sed for future annual report	notification)				
For further information	n concerning this matter, pleas	se call:					
GABRIELA MOTORGA		239 or (351-8540				
Name of Contact Person		at () Area Code & Daytime Telephone Number					
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:				
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□S43.75 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee					

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Taflahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

NETFORCE INC	00 7:06
(Name of Corporation as current P18000075886	ly filed with the Florida Dept. of State)
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: UNATUNC	The new
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", . "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address N/A Name of New Registered Agent	
(Florida st	reet addressi
New Registered Office Address:	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	us with and accept the obligations of the position.
Signature of New I	Registered 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 = ChiefExecutive 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>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5/Change			
Add			
Remove			
6) Change			
Add			

(Attach additional sheets, if necessary) A	rticles, enter change(s) here:). (Be specific)
If an amendment provides for an ev	xchange, reclassification, or cancellation of issued shares,
provisions for implementing the ar	mendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
A	

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Ç		
Effective date <u>if applicable</u> :	(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, epartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without sharehol	der action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amer ufficient for approval.	ndment(s)
	proved by the shareholders through voting groups. The following reach voting group entitled to vote separately on the amendment	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	······································	
	(voting group)	
07/28/202		
Dated		
Simpling GA	Iniele Notorga	
(By a c	lirector, president or other officer – if directors or officers have noted, by an incorporator – if in the hands of a receiver, trustee, or officed fiduciary by that fiduciary) GABRIELA MOTORGA	
	(Typed or printed name of person signing) PRESIDENT	
	(Title of person signing)	