P18 0000083516

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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	JTIONS CORP	
DOCUMENT NUMI	BER: P18000083516		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	NAHIL BARAKAT		
	DAYS OFFICIALS	Name of Contact Person	11
	BQ \$ SERVICES		
	2401 SUNSET POINT DR	Firm/ Company	
	LAKE WALES, FL 33898	Address	
		City/ State and Zip Cod	,
		City State and Zip Cod	
GHB.	2250@GMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
NAHIL BARAKAT		at (
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

300 CINTEIN SOLULIONS CAR	LUTIONS COE	₹P
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(Name of Corporation as current	tly filed with the Florida Dept. of State)
P18000083516	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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 add	
new registered agent and/or the new registered office addres	<u>ss:</u>
Name of New Registered Agent	
(Florida st	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
New Registered Office Address: New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	, Florida

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 = Trustev; 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 Doc 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 Doc, 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	\underline{V}	Mike Jones	
<u>X</u> Add	<u>SV</u>	Satly Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	MBR	AHMED ELSAYED ALY AMER	8301 WRENS WAY
X Add			LARGO FL 33773
Remove			
2) Change			
Add			
Remove			
3) Change			>\(\hat{\sigma}\)
Add			S S S S S S S S S S S S S S S S S S S
Remove			
4) Change			F 34 STATE LORIDA
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
THE COMPANY IS OWNED EQUILY BY THE FIVE SHAREHOLDERS			
THE CONTROL OF THE TYPE AND THE			
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	ECR	19 /	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	AHA 13.00	AUG	77
provisions for implementing the amendment if not contained in the amendment itself:	SSE	-2	_
(if not applicable, indicate N/A)	CTA	PH	Ш
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	S AIF	ဒ္	
	}		
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The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date if applicable: to more than 90 days after amendment file dates	
(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 date wild document's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
\square 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 owere 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):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
tvoting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder	
action was not required.	
	© ≯ >
DatedARCIAR	FILED
Signature / Wild Elmong y (By a director, president or other officer – if directors or officers have not been ?	<u> </u>
selected, by an incorporator – if in the hands of a receiver, trustee, or other coults	₹ 0
appointed fiduciary by that fiduciary)	
WAEL ELMOUGY	£
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	