## P18000091055

| (Requestor's Name)                      |  |  |  |  |  |
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| (Address)                               |  |  |  |  |  |
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| PICK-UP WAIT MAIL                       |  |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |  |
| (Document Number)                       |  |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |  |
| Special Instructions to Filing Officer. |  |  |  |  |  |
| J. HORNE                                |  |  |  |  |  |
| JUN 10 2022                             |  |  |  |  |  |
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2022 JUN -9 AM 9: 58 SECRETARY OF STATE TALLAHASSEC, I FOR

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Office Use Only

FLORIDA RESEARCH & FILING SERVICES, INC.

1211 CIRCLE DR

TALLAHASSEE, FL 32301

PH: 850-524-4381

PLEASE FILE THE ATTACHED AMENDMENT FOR:

 ${\bf 1.}\ \ {\bf IT\ STAFFING\ AND\ CONSULTING,\ INC.}$ 

PLEASE RETURN A STAMPED COPY

CHECK# 9289

FOR: \$35.00

THANK YOU!

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO                     | DRATION:                                    | D CONSULTING, INC.   |  |  |  |  |
|-----------------------------------|---|--|--|--|--|--|
| DOCUMENT NUN                      | 1BER: P18000091055                          |  |  |  |  |  |
| The enclosed Article              | es of Amendment and fee are su              | bmitted for filing.  |  |  |  |  |
| Please return all cort            | respondence concerning this ma              | tter to the following:   |  |  |  |  |
|                                   | Edwin Lott                                  |  |  |  |  |  |
|                                   |   | Name of Contact Person   | 1  |  |  |  |
|                                   | IT Staffing and Consulting, Inc.            |  |  |  |  |  |
|                                   |   | Firm/ Company  | <u>-</u>   |  |  |  |
|                                   | 1211 Circle Dr                              |  |  |  |  |  |
|                                   | Address                                     |  |  |  |  |  |
|                                   | Tallahassee, FL 32301                       |  |  |  |  |  |
|                                   | -   | City/ State and Zip Code   |  |  |  |  |
|                                   | edwin.lott@goisc.com                        |  |  |  |  |  |
|                                   | T T   | sed for future annual report                                     | notification)  |  |  |  |
| For further informati             | ion concerning this matter, pleas           |  | 1  |  |  |  |
| Name                              | e of Contact Person                         | Area Coo   | de & Daytime Telephone Number  |  |  |  |
| Enclosed is a check               | for the following amount made               |  |  |  |  |  |
| 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 |   | Street Address Amendment Section                                 |  |  |  |  |
|                                   | vision of Corporations                      | Division of Corporations   |  |  |  |  |
| P.(                               | O. Box 6327                                 | The Centre of Tallahassee 2415 N. Monroe Street, Suite 810       |  |  |  |  |
| Та                                | illahassee, FL 32314                        |  |  |  |  |  |

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

of

IT STAFFING AND CONSULTING, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P18000091055 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street 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 with and accept the obligations of the position. Signature of New Registered Agent, if changing

Check if applicable

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

| xttach <i>addition</i> | adding additional .<br>al sheets, if necessar | y). (Be specifi       | c)                |                |                |          |  |
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| t an amendme           | nt provides for an o                          | exchange, reclas      | isilication, or c | ancellation of | issued shares, |          |  |
| provisions for         | implementing the:                             | <u>imendment it n</u> | ot contained ir   | the amendme    | nt itself:     |          |  |
| (if not app            | licable, indicate N/A                         | )                     |                   |                |                |          |  |
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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)

Example:

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.

| $\underline{X}$ Change        | <u>PT</u>    | <u>John Doe</u> |                       |
|-------------------------------|--------------|-----------------|-----------------------|
| $\underline{X}$ Remove        | <u>V</u>     | Mike Jones      |                       |
| X Add                         | <u>SV</u>    | Sally Smith     |                       |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>     | <u>Addres</u> s       |
| 1) Change                     | D/S          | Lydia Lott      | 1211 Circle Dr        |
| X Add                         |              |                 | Tallahassee, FL 32301 |
| Remove                        |              |                 |                       |
| 2) Change                     |              | _               |                       |
| Add                           |              |                 |                       |
| Remove 3) Change              |              |                 |                       |
| Add                           |              |                 |                       |
| Remove                        |              |                 |                       |
| 4) Change                     |              | <u> </u>        |                       |
| Add                           |              |                 |                       |
| Remove                        |              |                 |                       |
| 5) Change                     |              |                 |                       |
| Add                           |              |                 |                       |
| Remove                        |              |                 |                       |
| 6) Change                     |              |                 |                       |
| Add                           |              |                 |                       |
| Remove                        |              |                 |                       |

| The date of each amendment(s) adopt   | ion: 6/1/2022   | , if other-than the                        |
|---|---|--|
| late this document was signed.  |   |  |
| Effective date <u>if applicable</u> :   |   |  |
|   | (no more than 90 days after amendment file d  | ate) •                                     |
| <b>Note:</b> If the date inserted in this block document's effective date on the Depart | does not meet the applicable statutory filing requirement of State's records.   | nents, this date will not be listed as the |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )  |  |
| The amendment(s) was/were adopted action was not required.                              | by the incorporators, or board of directors without share   | reholder action and shareholder.           |
| ☐ The amendment(s) was/were adopted by the shareholders was/were suffici                | by the shareholders. The number of votes cast for the ent for approval.   | amendment(s)                               |
|   | ed by the shareholders through voting groups. The following group entitled to vote separately on the amenda             | **   |
| "The number of votes cast for t   | he amendment(s) was/were sufficient for approval  | •  |
| by  |   |  |
|   | (voting group)  |  |
| //2   |   |  |
| Dated   | 2022  | -  |
|   | 1 111   | •  |
| Signature   | wind.   |  |
| -   | or, president or other officer – if directors or officers had an incorporator – if in the hands of a receiver, trustee, |  |
| •   | iduciary by that fiduciary)   | or other court                             |
|   | · ·   |  |
|   | EDWIN E LOTT  | <u>·</u>                                   |
|   | (Typed or printed name of person signing)   | •  |
|   | 200 cinci III   | ;  |
|   | YKESINEN!   |  |
|   | PRESIDENT (Title of person signing)   |  |