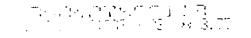
P19000012821

(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:
Umils

Office Use Only



300427686113



RECEIVED

2024 APR 17 PM 4: 10

2024 APR 17 PM 4: 10

Ги: 8 На ГІ ЯЯА 450

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ation: 10 cthe	In Moving	Systems	Incorporated
DOCUMENT NUMB	A	,		
The enclosed Articles of	of Amendment and fee are su	abmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
For further information	Northern 10 woo Hambur	Address City/ State and Zip Code Sed for future annual report	09419	ncosporated
Name o	f Contact Person	at (at Co) de & Daytime Telephone	Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:	
☐ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amer Divis	ing Address Indicate the section of Corporations Box 6327	Amend Divisio	Address ment Section n of Corporations entre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

01	· ·
Northern Maring	Systems Incorporated
O 1 O	ly filed with the Florida Dept. of State)
P14000012821	
(Document Number of	of 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:	
11/4	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.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2024 APR 17
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	Iress in Florida, enter the name of the
1//	<u></u>
(Florida st	reet 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	
n//A	

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.

<u>lf amending or adding addition</u> Attach <i>additional sheets, if nec</i>	mal Articles, enter change essary). (Be specific)	(s) here:		
//	adding). (Despenying)			
<u> </u>		<u>.</u>		
				
				
			 	
			·	
				
	<u> </u>			
				· · · · · · · · · · · · · · · · · · ·
	•			
	. ,,,			
f an amendment provides for	an exchange, reclassificat	ion, or cancellation of is	sued shares,	
provisions for implementing	the amendment if not conf	ained in the amendmen	t itself;	
(if not applicable, indicate	? N/A)			
//A				
				
			*	· · · · · · ·
		- · · · · · · · · · · · · · · · · · · ·		
	. .			
		<u> </u>		

.

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.

X Change	PT John l	Doe	
X Remove	V Mike	Jones .	
_X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) X Change	President	Jennifer Esposito	10 woodcott Dr.
Add			Hamburg, NJ
Remove			07419
2) Change	Treasurer	- Carrie Armstron	9 191 Croft Rd
_X Add			Tellico Plains, Ta
Remove 3) Change			3.7385
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
ffective date <u>if applicable</u> :	
(no n	nore than 90 days after amendment file date)
ote: If the date inserted in this block does not med ocument's effective date on the Department of State'	et the applicable statutory filing requirements, this date will not be listed as the seconds.
doption of Amendment(s) (CHECK	ONE)
The amendment(s) was/were adopted by the incorpaction was not required.	porators, or board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareh by the shareholders was/were sufficient for approx	nolders. The number of votes cast for the amendment(s) val.
The amendment(s) was/were approved by the share must be separately provided for each voting group	cholders through voting groups. The following statement entitled to vote separately on the amendment(s):
"The number of votes east for the amendmen	it(s) was/were sufficient for approval
by	."
(voting gr	oup)
	or other officer – if directors or officers have not been tor – if in the hands of a receiver, trustee, or other court
J-cnr (Typed	l or printed name of person signing)
Pro	sident
(Title o	of person signing)

•