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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>ITax C</u>	Center Co.			
DOCUMENT NUMBER: P9000014516 P9000014516				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concert	ning this matter to the following:			
Mediaire Andre				
incomine Andre	Name of Contact Person			
ITax Center Cor	TD.			
<u></u>	Firm/ Company			
<u>1</u> 211 NE 87 st				
	Address			
MIAMI				
2.77	City/ State and Zip Code			
compldrm@gma	uil.com ess: (to be used for future annual report notification)			
2 man ddie	233. (10 be used for future annual report hornication)			
For further information concerning this	matter, please call:			
To the second se	maker, pease cur.			
Mediaire Andre	at (786) 2777158			
Name of Contact Person				
Enclosed is a check for the following an	nount made payable to the Florida Department of State:			
■ \$35 Filing Fee □\$43.75 Fil Certificate				
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee			

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

<u>FL</u>	
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
1Tax Center Co P19000 J 145/6	<u></u>
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
1Tax Center Corp.	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.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	2027 DEC
	THE STATE OF THE S
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
	36
). If amending the registered agent and/or registered office add	dress in Florida, enter the name of the
new registered agent and/or the new registered office addres	<u> </u>
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	it:
hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of Man.	Registered Agent, if changing
Signature of New I	acgmerea ngent, y changing

theck if applicable

¹ 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 = 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>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Dianna Jean	924 Summer Glen Dr
x Add			Winter Haven Fl. 33880
Remove			
2) Change			
Add			
Remove Change	TR	Darius Polina	1211 NE 87 St
Add			Miami Fl. 33138
x Remove			
4) Change	<u>S</u>	Saint Amene	1211 NE 87 St
Add			Miami Fl. 33138
x Remove			
5) Change		_	
Add			
Remove			
) Change			
Add			
Remove			

nt Amene as Secretary.				
int Amene as Secretary.				
 				
				
 				
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f an amendment provides for	an exchange, reclassi	fication, or cancellat	on of issued shares,	
provisions for implementing t (if not applicable, indicate	<u>ne amendment it not</u> N/A)	contained in the amo	indment itself:	
	•			
				
				
 				

E. If amending or adding additional Articles, enter change(s) here:

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days af	ter amendment file date)
Note: If the date inserted in this block does not meet the applicable stat document's effective date on the Department of State's records.	utory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of action was not required.	directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through vot must be separately provided for each voting group entitled to vote separately.	
"The number of votes east for the amendment(s) was/were suffici	ent for approval
by	
(voting group)	
Dated 12- 7- 20	
Signature / al	
(By a director, president or other officer – if d selected, by an incorporator – if in the hands of	rectors or officers have not been
appointed fiduciary by that fiduciary)	a receiver, trustee, or other court
Mediaire Andre	
(Typed or printed name of	person signing)
President	
(Title of person signing)	