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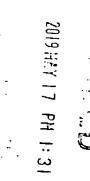
(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City)	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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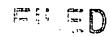
321 - 3 2019

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SVP4U IT IMPLE	MENTATION, INC.	
DOCUMENT NUM	BER:		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	ROSTYSLAV SIPAKOV		
		Name of Contact Person	n
	SVP4U		
		Firm/ Company	
	78 SW 7TH ST STE 500		
		Address	
	MIAMI, FL, 33130		
	-	City/ State and Zip Cod	e e
R SI	PAKOV@SVP4U.COM		
		sed for future annual report	notification
	,	•	
For further informatic	on concerning this matter, pleas	se call:	
ROSTYSLAV SIPA	KOV	at (8560722
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Mailing Address Amendment Section			Address Iment Section
	ision of Corporations	Divisio	on of Corporations
	Box 6327	Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of



SVP4U IT IMPLEMENTATION, INC.

2019 MAY 17 PM 1:31

(Name of Corporation as current)	y filed with the Florida Dept, of State)
P19000031286	
(Document Number 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:	
	The new
name must be distinguishable and contain the word "corporation "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 addr new registered agent and/or the new registered office address	
	<u>.</u>
Name of New Registered Agent	
(Florida str	vet adaress)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent	
l hereby accept the appointment as registered agent. I am familiar v	with and accept the obligations of the position.
-	
Signature of New R	egistered Agent, if changing

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 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>	<u>Addres</u> s
1) Change	S	SVP4U PUBLIC BENEFIT CORPORATION	16192 COASTAL HWY
Add			LEWES, DE 19958
XRemove			
2) Change	S	SVP4U SECURITIES, INC.	16192 COASTAL HWY
X Add			LEWES, DE 19958
Remove			
3.) Change			
Add			
Remove			
4) Change			
Add	•		
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Mach additional sheets, if necessary).	(Be specific)			
				
				
	<u> </u>			_
				
				
f an amendment provides for an excl	unga raclussification	or cancullation of	Ficeward charac	
provisions for implementing the ame	ndment if not contair	red in the amendm	ent itself:	
(if not applicable, indicate N/A)				
				<u> </u>

 05/14/2019 The date of each amendment(s) adoption:
date this document was signed.
Effective date if applicable:
(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 will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (<u>CHECK ONE</u>)
☐ 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/were 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 cast for the amendment(s) was/were sufficient for approval
by
(voting 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.
05/14/2019 Dated
Signature
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)
ROSTYSLAV SIPAKOV
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)