

P19 000032372

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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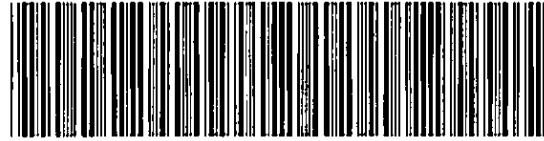
(Business Entity Name)

(Document Number)

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2021 FEB 22 PM 3:20

SECRETARY OF STATE
TALLAHASSEE, FL

11/21/21

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ORION QMS CONSULTING INC

DOCUMENT NUMBER: P19000032372

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT RECKLEIN
Name of Contact Person
VANDERBILT COMPANIES, INC
Firm/ Company
11983 TAMiami TRAIL N. STE. 138
Address
NAPLES, FL 34110
City/ State and Zip Code
VANDERBILTRJR@ATT.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT RECKLEIN at (239) 594-6999
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|---|--|---|--|

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

FILED

ORION QMS CONSULTING INC

2021 FEB 22 PM 3:28

(Name of Corporation as currently filed with the Florida Dept. of State)

P19000032372

SECRETARY OF STATE
TALLAHASSEE, FL

(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:

N/A The new 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)

1119 GOULD ST.

CLEARWATER, FL 33756

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1119 GOULD ST.

CLEARWATER, FL 33756

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

1119 GOULD ST.

(Florida street address)

New Registered Office Address:

CLEARWATER, FL

(City)

Florida 33756

(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.

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) (c), F.S.

(Attach additional sheets, if necessary). (Be specific)

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: _____, if other than the 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) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ 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 Ben E Mattox
(voting group)"

Dated 2/18/2021

Signature Ben E Mattox
(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)

BENJAMIN E MATTOX

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)