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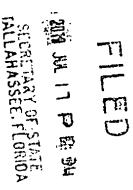
| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORA | TION:TAI | MPA AGILE GROU | D INC | | |
|--|---|--|--|--|--|
| DOCUMENT NUMBE | _ | 9000053243 | E. J. IVI. | | |
| The enclosed Articles of | | | | | |
| | | | | | |
| Please return all correspo | ndence concerning this n | natter to the following: | | | |
| | [,[,]] | S J. ALMANZAR | | | |
| | Name of Contact Person | | | | |
| | TAM | IPA AGILE GROUP | , INC. | | |
| Firm/ Company | | | | | |
| - | 167 | 51 TAYLOW WAY | | | |
| | | Address | | | |
| - | ODE | SSA, FL. 33556 | | | |
| | City/ State and Zip Code | | | | |
| | Т 11 Т | CALMANDA DODING | _ | | |
| E-mail address: (to be used for future annual report notification) | | | | | |
| _ | | | , | | |
| For further information con | ncerning this matter, plea | se call: | | | |
| | | | | | |
| LUIS J. | ALMANZAR | at (at (|) 202 4552 | | |
| | · | Area Co | de & Daytime Telephone Number | | |
| Enclosed is a check for the | following amount made | payable to the Florida Depa | ariment of State | | |
| _ | | | | | |
| | ☑\$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) | | |
| Mailing Amendme | Address ent Section | | Address | | |

Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

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| The new or the abbreviation ame must contain the |
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| The new |
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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)

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 | <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> | Address |
| 1) Change | PT | BENJAMIN OLINGA | 16751 TAYLOW WAY |
| Add | | | ODESSA, FL. 33556 |
| X Remove | | | |
| 2) Change | РТ | BENJAMIN O. ROEDELL | 16751 TAYLOW WAY |
| X Add | | | ODESSA, FL. 33556 |
| Remove | | | |
| 3) Change | | <u> </u> | |
| Add | | | |
| Remove | | | |
| 4) Change | | - | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | . | | |
| Remove | | | |

| f amending or adding additional Arti Attach additional sheets, if necessary). | (Be specific) |
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| f an amendment provides for an eych | nange, reclassification, or cancellation of issued shares, |
| provisions for implementing the ame (if not applicable, indicate N/A) | ndment if not contained in the amendment itself: |
| (ly not applicable, malcule NA) | N/A |
| - · · · - · | |
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| 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 datedocument's effective date on the Department of State's records. | te will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| 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 stateme must be separately provided for each voting group entitled to vote separately on the amendment(s): | nt |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by (voting group) | |
| (voting group) | |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required. | т |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. | |
| Dated 12 Jul 2019 Signature Bongamin Roedll | |
| Signature Bensamin Reld III | |
| (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 O. ROEDELL | |
| (Typed or printed name of person signing) | |
| PRESIDENT | |
| (Title of person signing) | |