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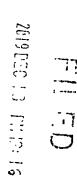
(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: LINGIL 802 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: **≤**\$52.50 Filing Fee □ \$35 Filing Fee **□\$43.75** Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status

Mailing Address

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

Street Address

(Additional copy is

enclosed)

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

Certified Copy (Additional Copy

is enclosed)

Articles of Amendment

to

Articles of Incorporation of

LWB11802	Corporation
(Name of Corporation as current)	y filed with the Florida Dept. of State)
71900	0084115
(Document Number o	f 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:	_
LINBIL Account	AC SERVICES. INC. The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " word "chartered," "professional association," or the abbreviation	n," ("company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	2019 D _C C
D. If amending the registered agent and/or registered office add- new registered agent and/or the new registered office address	
Name of New Registered Agent	
нате от неж кезметей язет	
(Florida str	reet address)
	L'harida
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	
Signature of New F	Registered 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>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			 ;
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Kemove			
6) Change		_	
Add			
Remove			

Attach <i>addi</i>	g or adding additio itional sheets, if nece	ssary). (Be speci	fic)			
				<u> </u>		
•						
						
		•				
						
					<u>.</u>	
an amen	dment provides for	an exchange, rech	assification, or ca	ancellation of issu-	ed shares,	
provisions	for implementing	the amendment if	not contained in	the amendment it	<u>self:</u>	
(if not	applicable, indicate	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, the document's effective date on the Department of State's records.	nis date 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 amendr by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following st must be separately provided for each voting group entitled to vote separately on the amendment(s)	atement :
"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 share action was not required.	cholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required.	ler
Dated Secrification Signature Signature	
(By a director, president or other officer – if directors of officers have not	been
selected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that fiduciary)	Court
Ce)ulian Hueley	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	