Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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To: 18506176383 From: 19165767051 Date: 02/14/20 Time: 10:17 AM Page: 03/07

To: 18006035868 From: Restricted Date: 02/14/20 Time: 3:51 AM Page: 01 850-617-6381 2/14/2020 11:51:30 AM PAGE 1/001 Fax Server



February 14, 2020

FLORIDA DEPARTMENT OF STATE

Division of Corporations SUPREME COMPUTER SOLUTIONS INC.

11188 NW 5TH MNR CORAL SPRINGS, FL 33071US

SUBJECT: SUPREME COMPUTER SOLUTIONS INC.

REF: P20000006286

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Document number is incorrect on page 1.

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Yasemin Y Sulker Regulatory Specialist III Letter Number: 820A00003373

FAX Aud. #: H20000050273

To: 18506176383 From: 19165767051 Date: 02/14/20 Time: 10:17 AM Page: 04/07

Articles of Amendment to Articles of Incorporation of

Supreme Computer Solutions Inc.		
(Name of Corporation :	as currently filed with the Florida Dept.	of State)
P20000006286		
(Document	Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statis Articles of Incorporation:	atutes, this Florida Profit Corporation ad	opts the following amendment(s)
A. If amending name, enter the new name of the corpo	oration:	
		The new
name must be distinguishable and contain the word " "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abb	"Inc," ar "Co". A professional corpora	rated" or the abbreviation tion name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	(22:	7 2
(Principal affice dadress MOST BE // STREET ADDRE	<u> </u>	020 SEE
		<u> </u>
C. Enter new mailing address, if applicable:		() () () () () () () () () ()
(Mailing address MAY BE A POST OFFICE BOX)		
		 = 5
		<u> </u>
		3,
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	office address in Florida, enter the namice address:	e of the
Name of New Registered Agent		
name of the regime says		
	(Florido street address)	
		Da MA
New Registered Office Address:	(City)	Florida (Zip Code)
	•	
New Registered Agent's Signature, if changing Registe	red Agent:	e
I hereby accept the appointment as registered agent. I at	n familiar with and accept the obligations	of the position.
\ Sivnatu	re of New Registered Agent, if changing	

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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)

Example:

Please note the officer/director title by the first letter of the office title.

P - President; F+ Vice President; T= Treasurer, S= Secretary, D= Director, TR+ Trustee, C = Chairmon 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>	<u>Iohn Doe</u>	
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	٦.	Sivan Itelman	11188 NW 5th MNR
Add			
Remove			Coral Springs, 14., 33071
2) X Change			
Add			
Remove			
3) Change			
Add			
Remove			
-I) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate NM)

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The date of each amendment(s) ado	ption: 2/12/2020	, if other than the
date this document was signed.	•	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than yo days after amenament fite vale)	
Note: If the date inserted in this blo document's effective date on the Department	ick does not nicet the applicable statutory filing requirements, this date wi artment of State's records.	Il not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt by the shareholders was/were suff	ted by the shareholders. The number of votes east for the amendment(s) icient for approval.	
The amendment(s) was/were appro- must be separately provided for co-	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voling group)	
,	(voting group)	
The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/vere adop action was not required.	ted by the incorporators without shareholder action and shareholder	
2/12/2020 Dated		
Signature	ector, 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	
appointe	d fiduciary by that fiduciary)	
S	ivan Itelman	
_	(Typed or printed name of person signing)	
	President	
-	(Title of person signing)	_