P20 000036402

(Re	equestor's Name)	
(Ad	dress)	·
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
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Certified Copies	Certificates	s of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Trident Client Syst	ems Inc				
DOCUMENT NUMI	BER: P20000036402					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	spondence concerning this ma	tter to the following:				
	William R Michaud JR					
		Name of Contact Persor)			
	Trident Client Systems Inc					
		Firm/ Company				
	100 N State Road 7					
	Address					
	Margate, fl 33063					
		City/ State and Zip Code	2			
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:						
William Michaud		at (954) 703-0865			
Name o	of Contact Person		de & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:						
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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

Trident Client Systems Inc		
(Name of Corporation as curre	ntly filed with the Florida Dept. of Sta	te)
P20000036402		
	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation adopts the	e following amendment(s) to
A. If amending name, enter the new name of the corporation:		
Data First Entry Corporation		The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co", "chartered," "professional association," or the abbreviation "P.,	A professional corporation name mu	hbreviation "Corp "
B. Enter new principal office address, if applicable:	3416 Norfolk Street	~~~7
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		701550
	Pompano Beach, Fl 33062	<u></u>
C. Enter new mailing address if applicables	-	<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3416 Norfolk Street	2 .
	Pompano Beach, Fl 33062	
D. If amending the registered agent and/or registered office at new registered agent and/or the new registered office address.	ddress in Florida, enter the name of the	<u> </u>
Name of New Registered Agent		
(Florida	street address)	
New Registered Office Address:		
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Age Thereby accept the appointment as registered agent. I am familia	$rac{ extbf{nt:}}{r}$ with and accept the obligations of the μ	position.
Signature of New	Registered Agent, if changing	_ _

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	<u>e</u>	
X Remove	<u>V</u>	Mike Jor	nes	
X Add	<u>sv</u>	Sally Sm	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

	ional sheets, i	if necessary).	icles, enter char (Be specific)					
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<u>an amendr</u>	<u>nent provide</u> or implemen	es for an exch	ange, reclassific	cation, or can	cellation of iss	ued shares.		
(if not a	pplicable, ind	ticate N/A)	nument if not co	ontained in th	<u>ie amendment</u>	itself:		
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The date of each amendment(s) acd date this document was signed.		, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this coartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ado action was not required.	nted by the incorporators, or board of directors without shareholder act	tion and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes cast for the amendmen ficient for approval.	1(s)
must be separately provided for	roved by the shareholders through voting groups. The following statem ack voting group entitled to vote separately on the amendment(s): for the amendment(s) was/were sufficient for approval	nent
by Incorporators		
	(voting group)	
Dated <u>02/03/2021</u>		
Signature(By a di	ector, product or output filter - if directors or officers have not been	
appointe	by an incorporator – if in the hands of a receiver, trustee, or other coud fiduciary by that fiduciary)	irt
-	William R Michaud Jr	
	(Typed or printed name of person signing)	
-	President	<u>. </u>
	(Title of person signing)	