## P20000041373

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2020 NOV 12 PN 3: 19 SECRETARY OF STATE

12/17/20 Cov

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: $\frac{C}{a}$	LE FINANCIAL	SOLUTIONS CORPORA	TION		
DOCUMENT NUMBER: P2000					
The enclosed Articles of Amendme		bmitted for filing.			
Please return all correspondence co	ncerning this ma	itter to the following:			
CUONG LE					
		Name of Contact Person	1		
CLE BUSIN	CLE BUSINESS SOLUTIONS INC				
<del></del>		Firm/ Company			
1752 SW 19	TH AVENUE				
<del></del>		Address	·		
DEERFIELI	D BEACH, FL 3.	3442			
<del></del>	<u> </u>	City/ State and Zip Code			
CLE.FINAN	ICIALS@GMAI	L.COM			
E-mail	address: (to be us	sed for future annual report	notification)		
For further information concerning	this matter, plea		<b>495-9456</b>		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following	ng amount made	payable to the Florida Depa	artment of State:		
	75 Filing Fee & Teate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address		Street Address			
Amendment Sect		Amendment Section			
Division of Corp. P.O. Box 6327	orations	Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 3	32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

CLE FINANCIAL SOLUTIONS CORPORATION	2020 NOV 12 PM 3: 19
(Name of Corporatio	n as currently filed with the Florida Dent. of State)
P20000041373	SECRETARY OF STATE
(Docum	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
CLE BUSINESS SOLUTIONS INC	The new
name must be distinguishable and contain the word "co." Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	rporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)  D. If amending the registered agent and/or registernew registered agent and/or the new registered agent.	ed office address in Florida, enter the name of the
Name of New Registered Agent	
Name of New Registered Agent	<del></del>
	(Florida street address)
N/A	
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Regil I hereby accept the appointment as registered agent.	stered Agent:  I am familiar with and accept the obligations of the position.
Signa	ture 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:	D.07			
X Change	<u>PT</u>	John Doc		
X Remove	Y	Mike Jones		
_X Add	<u>ŞV</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change			<del></del>	
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change			·	
Add				
Remove				
6) Change				
Add				
Remove				

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The date of each amendment	s) adoption:	, if other than the
date this document was signed.  Effective date if applicable:	NOVEMBER 6, 2020	
	(no more than 90 days after amendment fi	le date)
	his block does not meet the applicable statutory filing reque Department of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without	shareholder action and shareholder
■ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for re sufficient for approval.	the amendment(s)
	e approved by the shareholders through voting groups. The jet of for each voting group entitled to vote separately on the amount of the separately of the amount of the separately of the separa	<del>-</del>
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by		,
	(voting group)	
11-06- Dated	2020	
Signature		
(B <sub>y</sub>	adirector, president of other officer – if directors or officer ected, by an incorporator – if in the hands of a receiver, trust pointed fiduciary by that fiduciary)	
	CUONG LE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	