P20000056325

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2023 OCT 10 PH 2: 3

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	NC				
DOCUMENT NUM	BER: P20000056325					
	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	itter to the following:				
	MARA L JAIME					
	<u> </u>	Name of Contact Persor	1			
	MJ ACCOUNTING AND TA	AXES SERVICES LLC				
	Firm/ Company					
	14335 SW 120TH ST SUITE	211				
	Address					
	MIAMI, FL 33186					
		City/ State and Zip Code	2			
	INFO@MJACCTAX.COM					
	E-mail address: (to be us	sed for future annual report	notification)	<i>7.</i>		
	on concerning this matter, pleas		(003173			
MARA L JAIME		at () <u></u>			
Name of Contact Person		Area Co	de & Daytime Telephone Nun	nber		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:			
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 Y	Address Iment Section in of Corporations entre of Tallahassee V. Monroe Street, Suite 810 issee, FL 32303)		

2023 OCT 1 0 PH 2: 3:

Articles of Amendment to Articles of Incorporation of

TECH INSIDER INC					
(Name	of Corporation as current	ly filed with the Florida Dept. of State	<u>e)</u>		
P20000056325					
	(Document Number of	of Corporation (if known)			
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the	following	amendn	ient(s)
A. If amending name, enter the new n	ame of the corporation:				
N/A				The ne	.w.
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	lorp," "inc," or "Co".	A professional corporation name mus	breviatio	n "Corp.,	. ''
R Enter new principal office address	if applicable:	1541 BRICKELL AVE APT 1501		2	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		MIAMI, FL 33129		023 0	
				<u> </u>	الاستادار الاستادات
			:	0	1;
C. Enter new mailing address, if appl		1541 BRICKELL AVE APT 1501	,	P	. با دسم
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		MIAMI, FL 33129	<u>.</u>	?:	\ 12.20
				ယ 	
D. If amending the registered agent an new registered agent and/or the ne					
Name of New Registered Agent AUGUSTO RESTREPO					
Name of the A Regulation Agent	1541 BRICKELL AVE A	PT 1501			
	(Florida si	reet address)			
N. D. C. LOWE . Address	MIAMI	. Florida	33129		
New Registered Office Address:		(City)	(Zip Co	ode)	
New Registered Agent's Signature, if c Thereby accept the appointment as regis	hanging Registered Agen tered agent. I am familiar	t: with and accept the obligations of the p	osition.		
(u	susto Res	Registered Agent, if changing			
	Signature of New i	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.

X Change	<u> 17 </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>	<u>Addres</u> s
1) Change	P	AUGUSTO RESTREPO	1541 BRICKELL AVE APT 1501
X Add			MIAMI, FL 33129
Remove	P	NELSON ANDRES MORALES	2423 SW 147TH AVE UNIT 771
2) Change			
Add X Remove 3) Change			MIAMI, FL 33185
Add			
Remove 4) Change			
Add Remove			
5) Change			
Add Remove			
6) Change			
Add			

E. If amending or adding additional At (Attach additional sheets, if necessary)	ticles, enter change(s) here: (Be specific)			
N/A				
				
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			2023 00	المستندا
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			-5	, t12
		7.5	- P-	
			?	14.5
		1,4	2: 33	
				
F. If an amendment provides for an ex	change, reclassification, or cancellation of issued shares,			
provisions for implementing the an (if not applicable, indicate N/A)	endment if not contained in the amendment itself:			
N/A				

	10/05/2023	
The date of each amendment(s) a	doption:	_, if other than the
date this document was signed.		
	05/2023	
Effective date <u>if applicable</u> :	/	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will repartment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action and s	shareholder
☐ The amendment(s) was/were ad- by the shareholders was/were si	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
must be separately provided for	proved by the shareholders through voting groups. The following statement of each voting group entitled to vote separately on the amendment(s): for the amendment(s) was/were sufficient for approval	7023 OCT 10
0,	(voting group)	PH :
10/05/2023 Dated	en	1 2: 33
selecte	hirector president or other officer – if directors or officers have not been bed, by an incorporator – if in the hands of a receiver, trustee, or other court ated fiduciary by that fiduciary)	
	NELSON ANDRES MORALES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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