## P21000012670

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	C-STRATEGIES I RATION:	NC.		
DOCUMENT NUM	P21000012670			
		Lucia od for Allino		
	of Amendment and fee are su	-		
Please return all corre	spondence concerning this ma	tter to the following:		
	CHRISTOPH EVANGUELII	DI		
	C-STRATEGIES INC.	Name of Contact Persor	)	
	401 Holly Lane	Firm/ Company		
	Plantation, FL 33317	Address		
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code	e	
	e-strategies@pm.me			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
Christoph Evanguelic	li	305	772-0934	
Name of Contact Person		Area Co	) de & Daytime Telephone Number	
Enclosed is a check fe	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	iling Address		Address	
	endment Section ision of Corporations	Amendment Section Division of Corporations		

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

C-STRATEGIES INC.

Check if applicable

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

	v filed with the Florida Dept. of State)
P21000012670	
(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:	
	The new
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", or "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida st	veet address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar  Signature of Nove k	: with and accept the obligations of the position.  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	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action	<u>Title</u>	<u>Name</u>	Address
(Check One)	P	CHRISTOPH EVANGUELIDI	401 HOLLY LANE
1) Change			PLANTATION, FL 33317
X Add			
Remove	S	IRINA POGOSOVA	401 HOLLY LANE
2) Change X Add			PLANTATION, FL 33317
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

<u>If amending or addi</u> Attach <i>additional sh</i>	ects, if necessary).	(Be specific)				
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f an amendment pr provisions for impl	ementing the ame	nange, rectassing Indment if not e	cation, or cance ontained in the	amendment itse	<u>snares,</u> If:	
(if not applicab	le, indicate N/A)					
			····			
				·		
						·

The date of each amendment(s) a date this document was signed.	loption:, if other than t
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blocument's effective date on the Do	lock does not meet the applicable statutory filing requirements, this date will not be listed as t partment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) flicient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	
,	(voting group)
2/27/21	
Dated	
Signature (Div a d	rector, president or other officer – if directors or officers have not been
selecte	fector, president or other orner = if directors of others have not been  d, by an incorporator — if in the hands of a receiver, trustee, or other court  ed fiduciary by that fiduciary)
M. P. C.	CHRISTOPH EVANGUELIDI
	(Typed or printed name of person signing)

(Title of person signing)