## P21000024204

(Re	equestor's Name)
(Ac	ddress)
(Ac	idress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(В	usiness Entity Name)
(Do	ocument Number)
Certified Copies	_ Certificates of Status
Special Instructions to	Filing Officer:
	11/22/21
	Office Use Only



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2021 NOV 22 PV 12: 41

Letter Number: 121A00027324

## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 9, 2021

JACQUELINE HORTA 12905 SW 42 STREET SUITE 217 MIAMI, FL 33175

SUBJECT: 1 SITES SOLUTIONS CORP

Ref. Number: P21000024204

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Because of recent changes to Chapters 607, 605, and 620, Florida Statutes, your document does not meet current filing requirements. You may download the correct form and instructions from our website www.sunbiz.org.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Silas Regulatory Specialist II

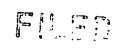
www.sunbiz.org

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: 1 SITES SOLUTION	ONS CORP			
DOCUMENT NUMBI	D21000021204				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
		Jacqueline Horta			
_	Name of Contact Person				
	JI	Horta Accounting & Taxes	Inc		
Firm/ Company					
		12905 SW 42 Street Suite 217			
_	-	Address			
		Miami, Florida, 3317:	5		
_		City/ State and Zip Code	<u> </u>		
jhortaf	l@bellsouth.net				
-	E-mail address: (to be us	sed for future annual report	notification)		
	concerning this matter, pleas	se call: at (	387-2906		
	Contact Person		)de & Daytime Telephone Number		
	the following amount made		•		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle 1886e, FL 32301		

## Articles of Amendment to Articles of Incorporation of



1 SITES SOLUTIONS CORP

2021 NOY 22 AM 9: 02

(Name of Corporation as curren	tly filed with the Florida De	pt. of State)-7			
P21000024204		7, 11 3	•		
(Document Number	of Corporation (if known)				
Pursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation	adopts the following an	nendment(s) to		
A. If amending name, enter the new name of the corporation:					
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corpo	porated" or the abbre	e new eviation tain the		
B. Enter new principal office address, if applicable:	4616 NW 114TH AVE APT 1010				
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	DORAL, FL 33178				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4616 NW 114TH AVE	APT 1010			
	DORAL, FL 33178				
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre		ame of the			
Name of New Registered Agent					
(Florida s	treet address)				
New Registered Office Address:		Florida			
	(City)	(Zip Code	e)		
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian		ons of the position.			
Simulation of Nim	Dunistanal Agus if also sis				
Signature of New	Registered Agent, if changing	ζ			

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	$\underline{\mathbf{V}}$	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	VP	RAMON FUENMAYOR	2201 LUDLAM RD APT562
Add X Remove			MIAMI, FL 33155
2) Change			
Add Remove			
3) Change			
Add			
4) Change			
Add			
5) Change			
Add			
6) Change Add			
Remove			

(Attach ad	lditional sheets,	if necessary).	es, enter change (Be specific)	e <u>(s) nere</u> :			
						•	
	<u>-</u>						
			_			<u> </u>	
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	<del></del>	<u> </u>		<u></u>			
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If an ame	endment provid	les for an exchar	age, reclassifica	ition, or cancell	ation of issued s	hares,	
provisio (if n	ons for impleme ot applicable, in	nting the amend	lment if not cor	tained in the a	mendment itself	<u>:</u>	
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	·						
	<del></del> .				<u>.                                    </u>		

11/15/2021 The date of each amendment(s) adoption: \_ \_\_\_\_\_, if other than the date this document was signed. 11/15/2021 Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s); "The number of votes east for the amendment(s) was/were sufficient for approval (voting group) 11/15/2021 Dated Signature ent or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) JOHANDRY F REYES URDANETA (Typed or printed name of person signing) PRESIDENT

(Title of person signing)