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S.B



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	NTS CORP	
DOCUMENT NUM	P21000034904		·
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	JOSE L MARTI		
		Name of Contact Persor	1
	1961 INVESTMENTS COR	P	
		Firm/ Company	
	14056 SW 53 TERRACE	,	
	-	Address	-
	MIAMI, FL 33175		
	·	City/ State and Zip Code	:
	INFO@JCBSOLUTIONSIN	C.NET	
	E-mail address: (to be us	sed for future annual report	notification)
	on concerning this matter, pleas	at () de & Davtime Telephone Number
Name	of Contact Person	. Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate 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)
Am Div P.O	iling Address endment Section ision of Corporations b. Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

1961 INVESTMENTS CORP

(Name of Corporation as curren	tly filed with the Florida Dept.	of State)
P21000034904		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s <i>Florida Profit Corporation</i> ado	pts 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". "chartered," "professional association." or the abbreviation "P.A.	A professional corporation nar	
B. Enter new principal office address, if applicable:	14056 SW 53 TERRACE	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI, FL 33175	
		~ 1
		;
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	14056 SW 53 TERRACE	
	MIAMI, FL 33175	·
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address		e of the
Name of New Registered Agent		
(Florida s	treet address)	
New Registered Office Address:		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations	of the position.
Signature of New	Registered Agent, if changing	
` .	reguler ou rigora, 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>PT</u>	John Do	<u>ne</u>					
X Remove	<u>v</u>	Mike Jo	ones .					
X Add	<u>sv</u>	Sally Sn	nith .					
Type of Action (Check One)	<u>Title</u>		<u>Name</u>			Address		
1) Change		_			 -			_
Add							 	_
Remove					٠ _			
2) Change		_		· ·	 -			_
Add							. 3	_
Remove 3) Change		_		_	-		 	_
Add								
Remove					_		 	
4) Change		_		 	 -	· · · · · · · · · · · · · · · · · · ·		
Add							 	
Remove					_			_
5) Change		_			 -			
Add								_
Remove					_		 _	
6) Change		_		. <u></u> .	 -		 	
Add								_
Remove					_			

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an amendment provides for an exchange,	reclassification, or cancellation of issued sl	iares,
	<u>it if not contained in the amendment itself:</u>	
provisions for implementing the amendmen		
(if not applicable, indicate N/A)		
provisions for implementing the amendmen	·	
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date this document was signe	nt(s) adoption:d.	if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will the Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wattion was not required.	ere adopted by the incorporators, or board of directors without shareholder action and	shareholder
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	
"The number of vot	es cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
11/1 Dated	0/2023	_
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	?
	JOSE L. MARTI	
	(Typed or printed name of person signing)	
	PRESIDENT .	
	(Title of person signing)	-1

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