P21000050311

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: BARLIN BUSINE	ESS SERVICES INC	
	1BER: P21000050311		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Amanda J. Beren		
		Name of Contact Persor	1
	CorpNet, Incorporated		
		Firm/ Company	
	31416 Agoura Rd., Ste. 118		
		Address	· · · · · · · · · · · · · · · · · · ·
	Westłake Village, CA 91361		
		City/ State and Zip Code	;
	filings@corpnet.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
Amanda J. Beren		at (449-2638
Name	of Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check f	or the following amount made p	payable to the Florida Depa	rtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation of

BARLIN BUSINESS SOLUTIONS INC

(<u>Name</u>	of Corporation as currently	filed with the Florida Dept. of State)	
P21000050311			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this <i>F</i>	Florida Profit Corporation adopts the follow	wing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
name must be distinguishable and contain "Inc.," or Co.," or the designation "("chartered," "professional association,"	Corp," "Inc," or "Co". A	ompany," or "incorporated" or the abbrevi professional corporation name must con	The new ation "Corp.," ntain the word
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>	<u>if applicable:</u> TREET ADDRESS)	104 Middleton Place, Ponte Vedra Beach	ı, FL 32082
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	icable:	104 Middleton Place, Ponte Vedra Beach	n, FL 32082
D. If annual line the		2-19	73
 If amending the registered agent ar new registered agent and/or the new 	id/or registered office address:	ess in Florida, enter the name of the	7
Name of New Registered Agent	Wendy Popkin	in contract of the contract of	
	104 Middleton Place	FL	<u></u> ::
	(Florida stree	et address)	
New Registered Office Address:	Ponte Vedra Beach	, Florida_32082	2
	(6	City) (Z	ip Code)
New Registered Agent's Signature, if continue the A	hanging Registered Agent: ered agent. I am familiar wi	th and accept the obligations of the position	n.
	M		
	Signature of New Reg	gistered Agent, if changing	

Check if applicable \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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:

X Change	<u>PT</u>	John Doe	
X Remove	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			
Add			
Remove			
2) Change		<u> </u>	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	eets, if necessary).	(Be specific)			
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The date of each amendment(s) date this document was signed.	adoption: if other than th
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a action was not required.	lopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	opted by the shareholders. The number of votes east for the amendment(s) ufficient for approval.
☐ The amendment(s) was/were a must be separately provided for	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas	for the amendment(s) was/were sufficient for approval
<u> </u>	(voting group)
Dated 12/20/2021	
Signature	m.
select	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	Wendy Barlin
	(Typed or printed name of person signing)
	DPST
	(Title of person signing)