721000065880

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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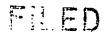
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ZIA CONSULTING ING
DOCUMENT NUMBER: P210000 65880
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Natthinee Kotsuwan Name of Contact Person
Name of Contact Person
zia Consulting May INC
8136 NW 108 AVE MARCHANT FUZBYZE NK
MIOMÍ FL 33178 City/ State and Zip Code
E-mail address: (to be used for fature annual report notification)
For further information concerning this matter, please call:
Northinee KetSuwon at 786, 716 0659 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing Address Street Address
Amendment Section Amendment Section
Division of Corporations Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



urrently filed with the Florida Dept. of State AUG 19 PH 2
ING ING
mber of Corporation (if known) P21000 (15-8)
T Z (OOD 6582
es, this Florida Profit Corporation adopts the following amendme
i <u>ion:</u>
TING INIC
· · · · · · · · · · · · · · · · · · ·
ion," "company," or "incorporated" or the abbreviation "Corp" Co". A professional corporation name must contain the word "P.A."
)
ce address in Florida, enter the name of the
address:
orida street address)
, Florida
(City) (Zip Code)
Agent:
miliar with and accept the obligations of the position.
New 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		<u> </u>	
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ticles, enter change(s) here: (Be specific)
	· · · · · · · · · · · · · · · · · · ·
f an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:
(y noi appacame, maicate NA)	
(у пот аррпсате, таксате тА)	
(y noi appricame, inaicate WA)	
у пот аррисате, такае тля)	
(y noi applicable, indicate WA)	
(ij noi uppricuste, thatcate WA)	
(ij noi uppneuvie, inaicate N/A)	
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(y noi applicable, maicale N/A)	
(y noi applicable, maicale N/A)	
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 da	ys after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or boar action was not required.	d of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	nber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes cast for the amendment(s) was/were su	fficient for approval
by(voting group)	.,,
(voting group)	
Signature (By a director, president or other officer – selected, by an incorporator – if in the har appointed fiduciary by that fiduciary)	
(Typed or printed nam	<u></u>
(Title of person signing	3)

• •