londa Department of State

Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000394332 3)))



H210003943323ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : FASTKIT CORP Account Number : I20100000009

: I20100000009 : (305)599-0839

Phone Fax Number

: (305)592-9591

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:	
----------------	--

COR AMND/RESTATE/CORRECT OR O/D RESIGN VERITAS ONE SOLUTION CORP

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

11)(()

OCT 25 2071

I ALBRITTON

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation of

VERITAS ONE SOLUTION CORP				97.
(Name of Co	orporation as curren	tly filed with the Florida	Dept. of State)	
	P2100006718	6		1
	(Document Number	of Corporation (if known))	<u> </u>
Pursuant to the provisions of section 607.1000 its Articles of Incorporation:	5, Florida Statutes, this	s Florida Profit Corporat	ion adopts the following amendmen	nt(s) t
A. If amending name, enter the new name	of the corporation:			
name must be distinguishable and contain the "Inc.," or Co.," or the designation "Corp, "chartered," "professional association," or t	" "Inc." or "Co".	A professional corporati	The new ated" or the abbreviation "Corp.," ion name must contain the word	
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		HECTOR O HER	NANDEZ	
		827 S KINGS AVE		
		BRANDON, FL. 33	3510	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		HECTOR O HERN	JANDEZ	
		827 S KINGS AVE		
		BRANDON, FL. 33	3510	
D. It amending the registered agent and/or new registered agent and/or the new reg	registered office add sistered office addres	iress in Florida, enter th s:	e name of the	
Name of New Revistered Agent	HECTOR O HERM	NANDEZ		
	827 S KINGS A	AVE		
	(Florida st	reet address)		
New Registered Office Address:	BRANDON		, Florida 33510	
		(City)	(Zip Code)	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

HECTOR OHERNANDE

Signature of 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, an 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 = Chie 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> 14</u>	John D	Q c	
X Remove	¥	Mike Jo	ones	
_X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1)Change	<u>T</u>	_	MAGDIEL FUENTES HERNANDE Z	827 S KINGS AVE
XXX Add				BRANDON, FL. 33510
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		-		
Add				
Remove				
5) Change	<u></u>	_		
Add				
Remove				
6) Change		_		
Add				
Remove				

(Attach additional	Inding additional Articles, enter change(s) here: I sheets, if necessary). (Be specific) IREASURY TO: MAGDIEL FUENTES HERNANDEZ
	827 S KINGS AVE, BRANDON, FL. 33510
provisions for im	provides for an exchange, reclassification, or cancellation of issued shares, inclementing the amendment if not contained in the amendment itself; able, indicate N/A)
	
	

.

the

the

The date of each amendment(s) adoption: date this document was signed.	_ if other thar
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 redocument's effective date on the Department of State's records.	not be listed as
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and staction was not required.	harcholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Dated 10/22/2021 Signature HECTOR OHERNANDE	
SignatureHECTOR OHERNANDE	
(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)	
HECTOR O HERNANDEZ	
(Typed or printed name of person signing)	
PRES	
(l'itle of person signing)	