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(Ke	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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2022 SEP -2 PM 4: 51)

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION:	TING SOLUTIONS FIRM	, INC.		
	IBER: P21000073139				
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	SHIRLEY SILVA				
		Name of Contact Person	1		
	TAX & ACCOUNTING SOI	LUTIONS FIRM, INC			
		Firm/ Company			
	10100 W SAMPLE ROAD #	330			
		Address			
	CORAL SPRINGS, FLORIDA 33065				
		City/ State and Zip Code	e		
	SHIRLEY@TAXACCOUN	TINGSOLUTIONSFIRM.C	COM		
	-	sed for future annual report			
For further informati	on concerning this matter, plea	se call: at (9069689		
Name	e of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check	for 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)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ar Di P.o	ailing Address nendment Section vision of Corporations D. Box 6327 llahassee, FL 32314	ection Amendment Section prporations Division of Corporations The Centre of Tallahassee			
		Tallaha	issee, FL 32303		

Articles of Amendment to Articles of Incorporation

TAX & ACCOUNTING SOLUTIONS FIRM, INC.	
	ntly filed with the Florida Dept. of State)
P21000073139	
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
N/A	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 name must contain the word
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office ad	
new registered agent and/or the new registered office addre	<u> </u>
Name of New Registered Agent (S/A)	
tFlorida s	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ager	nt:
I hereby accept the appointment as registered agent.—I am familia	
Signature of New	Registered Agent, if changing
Check if annicable	

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)

Example:

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	$\underline{\mathrm{PT}}$	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	HEITOR DA SILVA	8019 NW 66TH WAY
Add X Remove			PARKLAND, FL 33067
2) Change			
Add Remove 3) Change			
Add Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add Remove			

. <u>If amendir</u> (Attach <i>ada</i>	<u>ig or adding a</u> litional sheets,	i <mark>dditional Arti</mark> if necessary).	<u>cles, enter ch</u> (Be specific,	<u>ange(s) here</u> :)				
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If an amer	<u>idment provic</u>	<u>tes for an excl</u>	iange, reclass	ification <u>, or c</u> :	incellation of i	ssued shares,		
provision	s for impleme a applicable, i	nting the ame	ndment if not	t contained in	the amendme	nt itself:		
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The date of each amendment(s) a	08/29/2022 doption:	, if other than the
date this document was signed.	Topiton.	, is other man the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment	file date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requartment of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors withou	ut shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes east for fficient for approval.	or the amendment(s)
	proved by the shareholders through voting groups. The each voting group entitled to vote separately on the ac	
"The number of votes cast	for the amendment(s) was/were sufficient for approva	ıl
by	(voting group)	
	(voting group)	
selecte	rector, president or other officer – if directors or officed, by an incorporator if in the hands of a receiver, trued fiduciary by that fiduciary)	ustee, or other court
	(Typed br printed name of person signing)	<u>u</u>
	PRESIDENT	
	(Title of person signing)	