## PZ1000077147

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TALLAHASSEE, FLORIDA

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

G2 Consulting NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filling. Please return all correspondence concerning this matter to the following: Firm/ Company Lauderdele, FL 33312\_ City/ State and Zip Code Gal. gmoch Gamail. LOM
E-dail addess: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$52.50 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(72 Consulting Inc.			
(Name of Corporation as currently filed with the Florida Dept. o	f State)		
P21000077147			
(Document Number of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adoptits Articles of Incorporation:	its the following a	mendme	ent(s) to
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "Irc ." "company," or "incorporated" or	7	he new	1'
name must be distinguishable and contain the word "Arporation," "company," or "incorporated" or "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name "chartered," "professional association," or the abbreviation "P.A."	the abbreviation we must contain	"Corp.," the word	d
B. Enter new principal office address, if applicable:	<del>v</del>		
(Principal office address MUST BE A STREET ADDRESS)	<u></u>	021	
	[m] [m]	SEP	1
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C. Enter new mailing address, if applicable:	ეგ ეგენე	2779	
(Mailing address MAY BE A POST OFFICE BOX)			
_ <del></del>		<del></del>	
	<u>.</u>	2	
D. If amending the registered agent and/or registered office address in Florida, enter the name	of the		
new registered agent and/or the new registered office address:			
Name of New Registered Agent			
(Florida street address)			
New Registered Office Address:	Florida		
(City)	(Zip Ce	ode)	
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.		
Desired Land Control			
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, 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	PT	John Doe					SECRE!	2021 SEP -1	es i
X Remove	<u>V</u>	Mike Jones						EF.	g garen ragar
X Add	<u>sv</u>	Sally Smith					7-50	<u> </u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>:</u>		•	<u>Addres</u> s	one mon mon	州11:32	عور ريا
1) Change				<del>_</del> .	_			32	_
Add							<del></del> -		_
Remove							,		
2) Change					_				_
Add									_
Remove 3) Change					<del>-</del>				- 
Add									
Remove							<u> </u>		-
4) Change					_				_
Add									_
Remove									_
5) Change					_				_
Add									
Remove							<del>.</del>		-
6) Change									_
Add									_
Remove									

<u> </u>	amending or adding additional Articles, enter change(s) here: ttach additional sheets, if necessary). (Be specific)			
f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:				
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(if not applicable, indicate N/A)	provisions for implementing the amendment if not contained in the amendment itself:			
	(if not applicable, indicate N/A)			

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the De	ock does not meet the applicable statutory filing requirements partment of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareho	lder action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the ame fficient for approval.	
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	g statement SP - 2021 SEP - 2021
"The number of votes east	for the amendment(s) was/were sufficient for approval	ANA SAA
by	**	30 = 17
	(voting group)	MIII: 32
Dated 9-1-	2)	7 77 72
4		
selected	rector, president or other officer – if directors or officers have r I, by an incorporator – if in the hands of a receiver, trustee, or o ed fiduciary by that fiduciary)	
	Gal Gmach	
	(Typed or printed name of person signing)	
	CFO & President	
	(Title of person signing)	