P21000088858

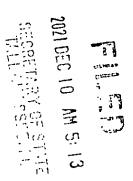
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| Certified Copies Certificates of Status | |
| <u>,</u> | |
| Special Instructions to Filing Office | er: |
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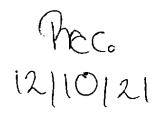


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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 17, 2021

ADAM BEIGHLEY, ESQ. 2385 EXECUTIVE CENTER DRIVE SUITE 250 BOCA RATON, FL 33431

SUBJECT: PALERMO CONSULTING INC

Ref. Number: P21000088858

We have received your document for PALERMO CONSULTING INC, however, upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to the Department of State for \$35.00.

The current name of the entity is as referenced above. Please correct your document accordingly.

The current document number of the entity is as referenced above. Please correct your document accordingly.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 421A00027937

Querida R Silas Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Amendment Section
Division of Corporations

202111511 - 1 211 1: 9

| NAME OF CORPORATION: PALL | ERMO CONSULTING |
|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| DOCUMENT NUMBER: P2100008 | 8858 |
| The enclosed Articles of Amendment | and fee are submitted for filing. |
| Please return all correspondence conce | ruing this matter to the following: |
| Adam Beighley | , Esq. |
| | Name of Contact Person |
| Beighely, Myric | k, Udell & Lynne, P.A. |
| | Firm/ Company |
| 2385 Executive | Center Drive, Suite 250 |
| | Address |
| Boca Raton, FL | 33431 |
| | City/ State and Zip Code |
| adam@bmulaw | com |
| E-mail add | ress: (to be used for future annual report notification) |
| For further information concerning this Adam Beighley, Esq. | |
| Name of Contact Person | at (561) 549-9036 Area Code & Daytime Telephone Number |
| Name of Contact Person | Area Code & Daytime Telephone Number |
| Enclosed is a check for the following a | mount made payable to the Florida Department of State: |
| ■ \$35 Filing Fee □\$43.75 F Certificat | ling Fee & S43.75 Filing Fee & S52.50 Filing Fee e of Status (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address Amendment Section Division of Corporate P.O. Box 6327 Tallahassee. FL 3231 | The Centre of Tallahassec |

Articles of Amendment to Articles of Incorporation of

PALERMO CONSULTING INC

2021 DEC 10 AM 5: 13

| | (Name) | of Corporation as currently | w filed with the Florida, Dept. of State) |
|-------------|----------------------------------------------------------------------------|---------------------------------|-------------------------------------------------------------------------------------------------------------|
| | P21000088858 | | MILE |
| | | (Document Number of | Corporation (if known) |
| | unt to the provisions of section 607 icles of Incorporation: | ,1006, Florida Statutes, this a | Florida Profit Corporation adopts the following amendment(s) |
| . <u>If</u> | amending name, enter the new n | ame of the corporation: | |
| CY P | ALERMO CONSULTING, INC. | | The new |
| Inc., | | Corp," "Inc," or "Co". A | ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word |
| | ter new principal office address. | | 583 NE Spanish Trail, Boca Raton, FL 33432 |
| rrinc | ipal office address <u>MUST BE A.S</u> | IKEEL AUDKESS) | |
| | | | |
| | oter new inalling address, if appl Failing address <u>MAY BE A POST</u> | | 583 NE Spanish Trail, Boca Raton, FL 33432 |
| | | | |
| | | | |
| | | | ess in Florida, enter the name of the |
| D6. | w registered agent and/or the new | v registered office address: | |
| | Name of New Registered Agent | N/A | |
| | | | |
| | | (Florida str | et address) |
| | | | |
| | New Registered Office Address: | N/A | , Florida |

Check if applicable

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 | PT | John Doe | |
|-------------------------------|--------------|----------------|---------------------------|
| X Remove | Y | 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 | v | YVETTE PALERMO | 360 NW 1ST AVE |
| X Add | | | DEERFIELD BEACH, FL 33441 |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | <u> </u> |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| f amending or adding additional Arti Attach additional sheets, if necessary). | (Be specific) |
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| I an amendment provides for an exch | ange, reclassification, or cancellation of issued shares, |
| provisions for implementing the amer | idment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | |
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| OCTOBER 27, 2021 | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|
| The date of each amendment(s) adoption: | , if other than ti |
| date this document was signed. | |
| OCTOBER 27, 2021 | |
| Effective date if applicable: | |
| (no more than 90 days after amendmen | t file date) |
| Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records. | quirements, this date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the incorporators, or board of directors without action was not required. | ut shareholder action and shareholder |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast if by the shareholders was/were sufficient for approval. | or the amendment(s) |
| The amendment(s) was/were approved by the shareholders through voting groups. The innst be separately provided for each voting group entitled to vote separately on the a | e following statement unendment(s): |
| The number of votes cast for the amendment(s) was/were sufficient for approve | al . |
| by | ." |
| (voting group) | - |
| OCTOBER 27, 2021 | |
| Dated | |
| Signature aluta Chily Col | |
| (By a director, president or other officer - if directors or office | ere have not have |
| selected, by an incorporator – if in the hands of a receiver, tr | ustee or other count |
| appointed fiduciary by that fiduciary) | usice, or other court |
| officers and analysis and address of | |
| Salvatore Christen | |
| (Typed or printed name of person signing | |
| President | |
| (Title of person signing) | |
| (- see as becade attentity) | |