P21000094789

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ASM IT SOLUTION	ens inc	
DOCUMENT NUMB	ER: P21000094789		
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	ASWANI PAYPALLA		
		Name of Contact Person	1
	ASM IT SOLUTIONS INC		
		Firm/ Company	,
	1326 PATTERSON TER		
		Address	414
	LAKE MARY, FL - 32746		
		City/ State and Zip Code	2
	aswani.paypalla@gmail.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	904	8641870
Name of Contact Person		at (Area Co	de & Daytime Telephone Number
	r the following amount made p		•
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 phassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

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	Articles of	f Amendment to	`	
	Articles of	Incorporation		
		of		2002 JILL 21 FAILLY
M IT SOLUTIONS INC				11. ==
· 	of Corporation as curre	ently filed with the Florid	la Dept. of State)	يسر رياني مواد ريان
1000094789				<u> </u>
	(Document Number	er of Corporation (if know	n)	
suant to the provisions of section 607 Articles of Incorporation:	.1006, Florida Statutes, tl	his <i>Florida Profit Corpora</i>	ation adopts the fol	lowing amendme
If amending name, enter the new n	ame of the corporation:	<u> </u>		
Α				The new
ne must be distinguishable and containc" or Co.," or the designation "C	Corp," "Inc," or "Co".	. A professional corpora	orated" or the abbreation name must c	eviation "Corp.," contain the word
hartered." "professional association,"	or the appreviation (r.	N/A		
Enter new principal office address,				
incipal office address <u>MUST BE A S</u>	HREET ADDRESS)			<u> </u>
Enter new mailing address, if appl (Mailing address MAY BE A POST	licable:	N/A		
(Mulling dudress MAI DEA 1 031	OTTICE BOX	·		
	nd/or registered office s	address in Florida, enter :	the name of the	
If amending the registered egent a	HU/OI ICEISTEICH OITICE A			
If amending the registered agent an new registered agent and/or the ne		C.K.J.		
new registered agent and/or the ne	w registered office adda	16.00.		
	w registered office adda			
	N/A			
<u>Name of New Registered Agent</u>	N/A (Floride	a street address)		
new registered agent and/or the ne	N/A (Floride		Florida	(Zip Code)

☐ 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	PAVAN KUMAR PAYPALLA	1326 PATTERSON TER
Add			LAKE MARY, FL - 32746
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u> </u>
Remove			
6) Change			
Add			
Remove			

case remove Pavai	sheets, if necesso			NAME IN A		
	n Kumar Paypalla	, titled VP from A	ASM (1 SOLU)	TONS INC.		
			 			
		-		· · · · · · · · · · · · · · · · · · ·		
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			-	 -		
		 -	····			
lf an amendmen	provides for an	exchange, recla	ssification, or c	ancellation of i	ssued shares,	
provisions for in	nplementing the rable, indicate N/	amendment if n	ot contained in	the amendmen	nt itself:	
	anie, inaicaie iv/	4)				
1						
					-	
				_ <u></u>		
						

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this locument's effective date on the	block does not meet the applicable statutory filing requirements, this date will Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without shareholder action and	shareholder
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	27
☐ The amendment(s) was/were a must be separately provided f	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	2022 JUL 21
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	2
by	(voting group)	AND TO BE
07/18/20 Dated	22	E F
Signature	director, president or other officer – if directors or officers have not been	<u> </u>
selec	eted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)	
	ASWANI PAYPALLA	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	