P21000094553

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
·
<u> </u>
Special Instructions to Filing Officer:
J. HORNE
DEC 16 2021
DEG 1

Office Use Only



400376840124

11/29/21--01021--001 **35.00

2021 NOV 29 PM 11: 57
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: KSITGROUP.COM	HINC.		
DOCUMENT NUM	IBER: P21000096553		···	
	s of Amendment and fee are sul	omitted for filit	ıg.	
Please return all corr	espondence concerning this mat	ter to the follo	wing:	
	Kazi Rahman			
		Name of Co	ntact Person	
	KSITGroup			
		Firm/ C	ompany	
	650 West Ave, Apt # 905			
		Ado	iress	
	Miami Beach, FL, 33139			
		City/ State a	ınd Zip Code	
	kazi.rahman@hotmail.com			
	E-mail address: (to be us	sed for future a	nnual report	notification)
For further informati Kazi Rahman	ion concerning this matter, pleas	se call:	404	9925861
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the	Florida Depa	artment of State:
\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Fi Certified ((Additiona enclosed)	Сору	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address				Address
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
P.O. Box 6327 Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2021 NOV 29 PM II: 57

	Ol		EGET HOTES III	0.
SITGROUP.COM INC.			SECRETARY OF	STATE
(Name o	f Corporation as currently	filed with the Flo	rida Dept. of State	Turk
21000096553				
	(Document Number of	Corporation (if kn	own)	
ursuant to the provisions of section 607.1 s Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corp	poration adopts the follow	ing amendment(
. If amending name, enter the new na	me of the corporation:			
SITGROUP INC.				The new
ame must be distinguishable and contain 'Inc.," or Co.," or the designation "C' 'chartered," "professional association,"	orp," "Inc," or "Co". A	professional corp	rporated" or the abbrevia poration name must cont	ition "Corp.," ain the word
. Enter new principal office address, i	if applicable:	NA		
Principal office address <u>MUST BE A S</u> T				
		 		
Enter new mailing address, if appli	cable:	NA		
(Mailing address MAY BE A POST O	<u>DEFICE BOX</u>)		<u>.</u>	
		•		
			-	
). If amending the registered agent an	d/or registered office addr	ess in Florida, ent	er the name of the	
new registered agent and/or the new	v registered office address:	<u>.</u>		
Name of New Registered Agent	NA			
Name of New Registerea Agent				 -
			 _	<u>—</u>
	(Florida stre	eet address)		
New Registered Office Address:	NA		, Florida	
<u> </u>		(City)	(Z.	ip Code)
New Registered Agent's Signature, if cl	hanging Registered Agent:	:		
I hereby accept the appointment as regist	ered agent. I am familiar v	: vith and accept the	ohligations of the positio	n.

Signature of New Registered Agent, if changing

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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT Jo	<u>hn Doe</u>			
X Remove	<u>V</u> <u>M</u>	ike Jones			
_X Add	<u>SV</u> <u>Sa</u>	lly Smith			
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s	
1) Change			_ .		
Add					
Remove					
2) Change					
Add					
Remove 3) Change					<u> </u>
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					
KCIIIO VC					

(Attach additional sheets, if necessary).	(Be specific)		
A			
· ·	-		<u> </u>

	<u> </u>		
	<u> </u>		
			•
			.
			· -
If an amendment provides for an exc	hange, reclassification,	or cancellation of issued	shares.
provisions for implementing the am (if not applicable, indicate N/A)	endment if not contain	ed in the amendment itse	<u>II:</u>
Λ			

.

The date of each amendment(s)	adoption:	if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements. Department of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sharehol	der action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amer sufficient for approval.	ndment(s)
	pproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendment	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
11/23/202	21	
Dated		
Signature		
(By a selec	director, president or other officer – if directors or officers have not ed, by an incorporator – if in the hands of a receiver, trustee, or ot need fiduciary by that fiduciary)	
	Kazi Rahman	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	