(Rec	questor's Name)
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(Doc	cument Number)
Certified Copies	Certificates of Status
Special Instructions to F	Filing Officer:
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	AUG 15 2022
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CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 882009 5018754

AUTHORIZATION : Trelbelleran

COST LIMIT : '\$ 43.75

ORDER DATE: August 12, 2022

ORDER TIME : 2:54 PM

ORDER NO. : 882009-005

CUSTOMER NO: 5018754

## DOMESTIC AMENDMENT FILING

NAME: BAY RIDGE CONSULTING (FLORIDA)

INC.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY

XX PLAIN STAMPED COPY

XX \_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

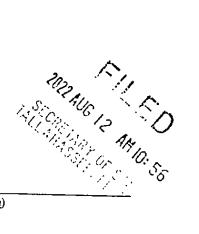
EXAMINER'S INITIALS:

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BAY RIDGE O	CONSULTING (FLORIDA) INC.
DOCUMENT NUMBER: P22000000579	
The enclosed Articles of Amendment and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
MICHAEL GIAMMARI	NO
	Name of Contact Person
MARINO CONSULTING	G OF FLORIDA INC.
	Firm/ Company
17901 COLLINS AVENU	JE, APT 3507
	Address
SUNNY ISLES BEACH,	FL 33160
	City/ State and Zip Code
ALUONGO@MPCPALL	С.СОМ
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pl	ease call:
AMEDEO LUONGO, CPA	347-0307
Name of Contact Person	at (908 347-0307  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	le payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassec 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of



BAY RIDGE CONSULTING (FLORIDA) INC.

(Name of Corporation as currently filed with the Florida Dept. of State)  P22000000579  (Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  MARINO CONSULTING OF FLORIDA INC.  In new must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp" "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  SUNNY ISLES BEACH, FL 33160  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  SUNNY ISLES BEACH, FL 33160  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  MICHAEL GIAMMARINO  17901 COLLINS AVENUE, APT 3507  (Florida street address)		<del></del>	
(Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  MARINO CONSULTING OF FLORIDA INC.  **The new must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. **Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS*)  SUNNY ISLES BEACH, FL 33160  C. **Enter new mailing address, if applicable: (Mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  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:  **MCHAEL GIAMMARINO**  17901 COLLINS AVENUE, APT 3507	(Name	e of Corporation as curre	ntly filed with the Florida Dept. of State)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  MARINO CONSULTING OF FLORIDA INC.  The new must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  3. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  SUNNY ISLES BEACH, FL 33160  17901 COLLINS AVENUE, APT 3507  SUNNY ISLES BEACH, FL 33160  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  MICHAEL GIAMMARINO  17901 COLLINS AVENUE, APT 3507	P2200000579		
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MARINO CONSULTING OF FLORIDA INC.  The new manust be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." "Inc.," or "Co.," or the designation "Corp," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)  SUNNY ISLES BEACH, FL 33160  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  SUNNY ISLES BEACH, FL 33160  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  MICHAEL GIAMMARINO  17901 COLLINS AVENUE, APT 3507	Pursuant to the provisions of section 60 its Articles of Incorporation:		•
MARINO CONSULTING OF FLORIDA INC.  The new manner must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co. A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  SUNNY ISLES BEACH, FL 33160  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  SUNNY ISLES BEACH, FL 33160  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  MICHAEL GIAMMARINO  17901 COLLINS AVENUE, APT 3507	A. If amending name, enter the new	name of the composition.	
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SUNNY ISLES BEACH, FL 33160  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  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  MICHAEL GIAMMARINO  17901 COLLINS AVENUE, APT 3507			
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Name of New Registered Agent  17901 COLLINS AVENUE, APT 3507			SUNNY ISLES BEACH, FL 33160
17901 COLLINS AVENUE, APT 3507	new registered agent and/or the ne	w registered office addres	<u>s:</u>
	The sylven Registered Agent	17901 COLLINS AVENI	TE ADT 2507
(1 to the street diagress)			<del></del>
Non Project of Control SUNNY ISLES BEACH	New Period Long Co.	_	
Florida Florida	New Registered Office Address:		, Flonda, Flonda
(City) (Zip Code)			(Zip Code)
	hereby accept the appointment as regist	ered agent. I am familiar	with and accept the obligations of the position.
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		_	
ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	<b>~</b>	0	
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	<del>1 ).</del> ~	Stonature of Now R	pristaged Agant if showing
nereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		Olymanar og men m	egisterea Agent, tj changing
Signature of New Registered Agent, if changing		\	\
Signature of New Registered Agent, if changing	The amendment(s) is/are being filed pu	ursuant 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>	Address
1) Change	С	MICHAEL GIAMMARINO	17901 COLLINS AVE APT 3507
X Add			SUNNY ISLE BEACH FL 33160
Remove			
2) Change	<u>s</u>	MICHAEL GIAMMARINO	17901 COLLINS AVE APT 3507
X Add			SUNNY ISLE BEACH FL 33160
Remove Change	<del>-</del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	C. A.A.
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an amendment provides for an exchar	nge, reclassification, or cancellation of issued shares,
TO LISTORS TO LITTUIGHTENIUM ING AMERIC	lment if not contained in the amendment itself:
(if not applicable, indicate N/A)	and the same and the same and the same and the same
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<u> </u>	

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The date of each amendment(s)	adoption:	ic a
date this document was signed.		, if other than the
Effective date if applicable:		
	(no more than 90 days after a	amendment file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutor epartment of State's records.	y filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of direc	ctors without shareholder action and shareholder
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of vifficient for approval.	otes cast for the amendment(s)
man of separately provided joi	proved by the shareholders through voting geeach voting group entitled to vote separated for the amendment(s) was/were sufficient for	ly on the amendment(s):
by	were surficient to	n approval
· · · · · · · · · · · · · · · · · · ·	(voting group)	
08/08/2022 Dated		
scicyte	rector, president or other officer – if director, by an incorporator – if in the hands of a reed fiduciary by that fiduciary)	rs or officers have not been ceiver, trustee, or other court
	MICHAEL GIAMMARINO	
	(Typed or printed name of person sign	ing)
	PRESIDENT	
	(Title of person signing)	