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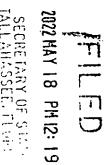
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COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: Omnichannel Services Corp	
DOCUMENT NUMBER: <u>122000011384</u>	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Mara Lucia Jaime	
My Accounting & Taxes Services	<u>U</u> c
14335 S.W 120th staut swite 2	<u>. ()</u>
Mianui, Fl 33186 City/ State and Zip Code	_
info @ mjacc tax. com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Mara Weig Laime at (305), 690-3173 Name of Contact Person Area Code & Daytime Telephone Num	<u>}</u> ber
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Taliahassee, FL 32314

Articles of Amendment Articles of Incorporation υſ

	_	12 Th 12 100
(Name of Corporation as cu	rrently filed with the Florida Dept. of State)	SSECTION TO
(Document Nun	nber of Corporation (if known)	-50 K
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the fo	ollowing amendmen(s) to
A. If amending name, enter the new name of the corporation	on:	
		The new
name must be distinguishable and contain the word "corporatio "Inc.," or Co.," or the designation "Corp," "Inc," or "Co "chartered," "professional association," or the abbreviation "	o". A professional corporation name must	reviation "Corp" contain the word
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
		
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
		<u> </u>
D. If amending the registered agent and/or registered office	e address in Florida, enter the name of the	
new registered agent and/or the new registered office ad		
Name of New Registered Agent		
		
(Flor	ida street address)	
New Registered Office Address:	. Florida	
New registered Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A lereby accept the appointment as registered agent. I am fam		sition.
, . , , , , , , , , , , , , , , , , , ,		
Simustina of 1	New Registered Agent, if changing	
Signature of i	sew negimereu ngeni, ij chunging	
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	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	Julian A Galeano	14335 SW 120th St sweall
Add			Miami, 7 33186
Remove 2) Change	<u> </u>	Santiago londono	14335 SW 120th St Swed.
Add			Miami, 7 33186
Remove 3) Change			
Add			
Remove			
4) Change	-		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary)	ticles, enter change(s) here: (Be specific)	
	<u> </u>	
		
		 -
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- 44-2-11-11-11-11-11-11-11-11-11-11-11-11-1		
f an amendment provides for an ex	change, reclassification, or cancellation of issued shares,	
provisions for implementing the an	endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		

The date of each amendment(s) date this document was signed.	doption:, if other than t
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	block does not meet the applicable statutory filing requirements, this date will not be listed as topartment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were a action was not required.	opted by the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were a by the shareholders was/were	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	for the amendment(s) was/were sufficient for approval
by	
	(voting group)
Dated	15-22
Signature	
(By a selec	irector, president or other officer—if directors or officers have not been d, by an incorporator—if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary
	(Typed or printed name of person signing) (Title of person signing)