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Office Use Only

COVER LETTER

| TO: Amendment Section | ي. م | ,e |
|---|---------|----|
| NAME OF CORPORATION: BEIMAR Cloud CONSULTING | Corp | |
| DOCUMENT NUMBER: <u>P22000018173</u> | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | |
| Please return all correspondence concerning this matter to the following: | | |
| APestano | | |
| Name of Contact Person | | |
| BSSN | | |
| Firm/ Company | | |
| 4612 N. HIATUS Rd | _ | |
| Address | | |
| City/State and Zip Code | | |
| City/ State and Zip Code | | |
| E-mail address: (b be used for future annual report notification) | | |
| E-mail address: (to be used for future annual report notification) | | |
| For further information concerning this matter, please call: | | |
| | | |

A <u>Restrano</u> Name of Contact Person at (<u>954</u>) <u>578-0016</u> Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee

Status Certificate of Status

□]\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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| · Articles | of Amendment to of Incorporation of Consult in Consult Page 2:45 |
| Articles (| to of Incorporation |
| | of PA |
| Belmare Cloud | CONSULTING CORPANS |
| - | rently fued with the Piorina Dept. of State) |
| <u>P22000</u> (Document Numi | \bigcirc [\bigotimes [7 \bigotimes] |
| Pursuant to the provisions of section 607.1006, Florida Statutes, | this Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation | 11 |
| name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P | 2. A professional corporation name must contain the word |
| B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>) | West Palm Beach FL 33401 |
| C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | West Prim Brach fi 23401 |
| D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr | |
| Name of New Registered Agent | |
| | street address) |
| | |
| <u>New Registered Office Address</u> : | (City), Florida (Zip Code) |
| | |
| | |
| <u>New Registered Agent's Signature, if changing Registered Age</u> Understand the appointment as registered agent. I am familia | |
| | |
| | |

Signature of New Registered Agent, if changing

Check if applicable

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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:

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| <u>X</u> Change | <u>10h</u> | n Doe | |
|--------------------------------------|---------------------|-----------------|---|
| X Remove | <u>V</u> <u>Mik</u> | te Jones | |
| <u>X</u> Add | <u>SV Sall</u> | <u>y Smith</u> | |
| <u>Type of Action</u> (Check One) | Title | Name | Addiess |
| 1) Change | VP | BILLOWS, CeliNA | 700 5, Rosemary Ave Stezo |
| Add | | | West Palm Beach Fr 33401 |
| 2) Remove | <u>P</u> | BILLOWS, Scott | 700 S- Resembley AJE STERCH West Palm Bauch FL 33401 |
| 3) Remove Change | <u> </u> | Eques, Jorge | 2941 Hidden Hollow Liv Davie Fi 33328 |
| 4) Remove | | | |
| Remove 5) Change Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| (Anaon adamona | il sheets, if necessary). | cles, enter change(s) here: (Be specific) | | |
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| . If an amendment | provides for an excha | ige, reclassification, or cancellatio | n of issued shares, | |
| provisions for im | plementing the amend | lment if not contained in the amen | idment itself: | |
| (if not applied | able, indicate N/A) | | | |
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| The date of each amendment(s) adoption: | , if other than the |
|---|---|
| date this document was signed. | |
| Effective date <u>if applicable</u> : | |
| (no more | than 90 days after amendment file date) |
| Note: If the date inserted in this block does not meet the document's effective date on the Department of State's red | e applicable statutory filing requirements, this date will not be listed as the ords. |
| Adoption of Amendment(s) (<u>CHECK ON</u> | 2) |
| The amendment(s) was/were adopted by the incorporate | ers, or board of directors without shareholder action and shareholder |
| action was not required. | |
| The amendment(s) was/were adopted by the shareholde by_the_shareholders_was/were_sufficient_for_approval | |
| The amendment(s) was/were approved by the sharehold must be separately provided for each voting group entit | |
| "The number of votes cast for the amendment(s) w | as/were sufficient for approval |
| by | |
| by(voting group) | |
| selected, by an incorporator – if appointed fiduciary by that fidu | Eques ned name of person signing) |
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