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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:PORATION	SSIONAL SERVICES CO	RP		
DOCUMENT NU	P220(0)150453				
The enclosed Artic	cles of Amendment and fee are su	abmitted for filing.			
Please return all co	orrespondence concerning this ma	atter to the following:			
	OSMANY GARCIA GISPE	RT			
		Name of Contact Person	n		
	GISPERT PROFESSIONAL SERVICES CORP				
		Firm/ Company			
	1778 POLK STREETAPT 1.	517			
	Address				
	HOLLYWOOD,FL.33020				
		City/ State and Zip Cod	e		
	F-mail address: (to be u	sed for future annual report	notification)		
	13 man address, (to be d	sed for future annual report	notification		
For further inform	ation concerning this matter, plea	se call:			
	Ç 1				
OSMANY GARC	TA GISPERT	386	301-0450		
Name of Contact Person			de & Daytime Telephone Number		
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fe	e □S43.75 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division The Co 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment Articles of Incorporation of

FII ED

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GISPERT PROFESSIONAL SERVICES CORP	EGEL NOO GO TTY TOO	
(Name of Corporation as curren	tly filed with the Florida Dept. of Stafe NE JARY OF 311	
P22000059453	TALL AHASSEELFL	
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new name of the corporation:		
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.A.	A professional corporation name must contain the word	
B. Enter new principal office address, if applicable:	1778 POLK STREETAPT 1517	
(Principal office address MUST BE A STREET ADDRESS)	HOLLYWOOD,FL.33020	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1776 POLK STREETAPT 1517	
(making dualess MAT DE ATOST OFFICE DOA)	HOLLYWOOD,FL.33020	
D. If amending the registered agent and/or registered office ad-		
new registered agent and/or the new registered office addres	<u>\$5:</u>	
Name of New Registered Agent		
(Florida s	street address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian		
	, , ,	
Signature of New	Registered Agent, if changing	
Chack 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)

Example:

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.

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) X Change	P	OSMANY GARCIA GISPERT	1776 POLK STREET APT 1517
Add			HOLLYWOOD.FL.33020
Remove			
2) Change			<u> </u>
Add			
Remove 3) Change			
Add			
Remove			
4) Change	-		
Add			
Remove			, <u> </u>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach addition	adding additional Articles, enter change(s) here: al sheets, if necessary). (Be specific)		
CHANGE ADRESS FOR PRINCIPAL, MAILING, REGISTERED AGENT AND PRESIDENT INSTEAD OF			
778 POLK STREET APT 1517 IS 1776 POLK STREET APT 1517 HOLLYWOOD FL 33020			
· · · · · · · · · · · · · · · · · · ·			
_			
 			
	nt provides for an exchange, reclassification, or cancellation of issued shares,		
(if not app	implementing the amendment if not contained in the amendment itself: licable, indicate N/A)		
			
			

) 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 thi document's effective date on the	s 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)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sharehol	lder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amer e sufficient for approval.	ndment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
08/30/20 Dated Signature)22	
sele	a director, president or other officer – if directors or officers have noted, by an incorporator – if in the hands of a receiver, trustee, or oto inted fiduciary by that fiduciary)	
	OSMANY GARCIA GISPERT	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	