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MM 5-105

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	RPORATION:
	UMBER:
The enclosed Ar	ticles of Amendment and fee are submitted for filing.
Please return all	correspondence concerning this matter to the following:
	MARIA FORERO
	Name of Contact Person
	JVPM BUSINESS SOLUTIONS CORP
	Firm/ Company
	12001 DR M. L. K JR ST N APT 2203
	Address
	ST PETERSBURG FL 33716
	City/ State and Zip Code
	MASTERSOLUTION219@GMAIL.COM
	E-mail address: (to be used for future annual report notification)
For further infor	nation concerning this matter, please call:
MARIA FOREE	2O 727 8772089
N	ame of Contact Person Area Code & Daytime Telephone Number
Enclosed is a che	ck for the following amount made payable to the Florida Department of State:
S35 Filing F	Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314

Street Address

Amendment Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

IVPM	RUCIN	EGG GUI	TITIONS	CORD

(Name of Corporation as currently fil	ed with the Florida Dept. of State)	
23000000266		
(Document Number of Co	rporation (if known)	
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> s Articles of Incorporation:	rida Profit Corporation adopts the fo	llowing amendment(
. If amending name, enter the new name of the corporation: MC ONE SOLUTIONS CORP		The new
ame must he distinguishable and contain the word "corporation," "complus.," or Co.," or the designation "Corp," "Inc," or "Co". A prichartered," "professional association," or the abbreviation "P.A."		eviation "Corp.,"
. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		
		2025
_		=
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		R 7
	· 	1 . P
. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the	
M. CM. D. C. LA		
the state of the s		
(Florida street a	ddress)	
New Registered Office Address:	, Florida	
(City	·)	(Zip Code)
num Danistanad Assault Cianasas (C.A. vica Danis Assault		
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 pos	ition.
Signature of New Regist	tered Agent, if changing	
heck if applicable		

 \square 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	<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) Change	VP	RAFAEL HERNANDEZ	12001 DR M.L.K. JR ST N APT 2			
X Add			ST PETERSBURG FL 33716			
Remove						
2) Change			_			
Add						
Remove 3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change		-				
Add						
Remove						

Attach additio	adding additiona and sheets, if necess	ary). (Be spe	rcific)	 -			
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lf an amendm	ent provides for ar	a exchange, re	classification.	or cancellation	ı of issued shai	res.	
provisions for	implementing the	<u>e amendment i</u>	if not containe	d in the amen	dment itself:		
(if not app	licable, indicate N	/.4)					
							
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	 -						
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The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	es after amendment file date)
(no more than 90 day	rs after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board action was not required.	d of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	nber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes east for the amendment(s) was/were su	fficient for approval
by	··
(voting group)	
Dated 3 /12 / 2075 Signature //WWW/Mi	
(By a director, president or other officer – selected, by an incorporator – if in the han appointed fiduciary by that fiduciary)	
Maria Alejandi	o Forero Vargas. of person signing)
(Typed of printed name	or person arguing)
(Title of person signing)

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