P23000032500

| (Requestor's Name) |
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| (Address) |
| (Address) |
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| PICK-UP WAIT MAIL |
| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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2021 MAY 18 AM 8: 07 SECRETALY OF STATE SALUZATA SEE, FL



COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | RATION: JANEL CONSUL | TING CORP | | |
|---------------------------|--|---|---|---|
| DOCUMENT NUME | | | | |
| The enclosed Articles | of Amendment and fee are so | bmitted for filing. | | |
| Please return all corres | pondence concerning this ma | atter to the following: | | |
| | MILANO ANGULO, MARI | ELJ | | |
| | Name of Contact Person | | | _ |
| | | Firm Company | | - |
| | 8958 W STATE ROAD 84, #1235 | | | |
| • | | Address | | - |
| FORT LAUDERDALE, FL 33324 | | | _ | |
| | | | | |
| | marieljm 1980 <i>ia</i> gmail.com | | | |
| • | E-mail address: (to be us | sed for future annual report | notification) | · 23 |
| For further information | i concerning this matter, plea | se call: | | PRIMAY IS MI 8: 07 2023 MAY IS MI 8: 07 SECRETARY OF STATE TAILLAHOUSEE, FL |
| MILANO ANGULO, MARIFI, J | | 954 at (| 559-2987 | 题 8 |
| Name of Contact Person | | Area Code & Daytime Telephone Number | | |
| Enclosed is a check for | the following amount made | payable to the Florida Dep: | irtinent of State: | STAT STAT |
| S35 Filing Fee | □\$43,75 Filing Fee & Certificate of Status | □S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | , kų |
| Ame Divis P.O. | ing Address indiment Section sion of Corporations Box 6327 thissee, FL 32314 | Amend Divisio The Co | Address Incut Section on of Corporations entre of Tallahassee S. Monroe Street, Suite 810 | |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

| JANEL CONSULTING CORP | |
|--|--|
| (Name of Corporation as currently file | d with the Florida Dept. of State) |
| P23000032500 | |
| (Document Number of Cor | poration (if known) |
| Pursuant to the provisions of seenon 607,1006. Florida Statutes, this <i>Flori</i> its Articles of Incorporation: | da Profit Corporation adopts the following amendment(s) |
| A. If amending name, enter the new name of the corporation: | |
| name must be distinguishable and contain the word "corporation," "composition," "for the designation "Corp," "Inc," or "Co". A pro- "chartered," "professional association," or the abbreviation "P.4." | The new my, "or "meorporated" or the abbreviation "Corp.," lessional corporation name must 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 MAY BE A POST OFFICE BOX) | |
| D. If amending the registered agent and/or registered office address i new registered agent and/or the new registered office address: Name of New Registered Agent | ATT 18 |
| Jane of New Regionered argent | |
| (Florida street ad | OF STATES OF STA |
| New Registered Office Address: | , Florida |
| (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. Tam familiar with a | nd accept the obligations of the position. |
| Signature of New Registe | red Avent, if changing |
| Check if applicable [] The amendment(s) (s/are being filed pursuant to s, 607,0120 (14) (e), F | |

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; F = Treasurer, S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer, CFO = Chief Emancial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be P1D.

Changes should be noted in the following manner. Currently John Doc 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 Doc, 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 | |
| <u>X</u> Add | <u>SV</u> | Sally Smith | |
| Type of Action (Check One) | <u>l'itte</u> | <u>Name</u> | <u>Addres</u> s |
| D Change | VP | NELSON A, MARRUFFO | 8958 W STATE ROAD 84, #1235 |
| XAdd | | | FORT LAUDERDALE, FL 33324 |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | - | | ~ 20 |
| Add | | | 2023 MAY 18 SECRETAR TALLARIA |
| Remove | | | <u> </u> |
| 5) Change | - | | SS CF A |
| Add | | | <u> </u> |
| Remove | | | ATE 08 |
| 6) Change | | | |
| Add | | | 4 |
| Remove | | | |

| • • • | 05/05/2023 | |
|---|--|--|
| The date of each amendment(s) date this document was signed. | | , if other than the |
| Effective date <u>if applicable</u> : | 5/05/2023 | |
| | (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 requestrment of State's records. | nirements, 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. | dopted by the incorporators, or board of directors withou | nt shareholder action and shareholder |
| ☐ The amendment(s) was/were a by the shareholders was were | dopted by the shareholders. The number of votes cast fo sufficient for approval | or the amendment(s) |
| ☐ The amendment(s) was were a must be separately provided f | pproved by the shateholders through voting groups. The or each voting group entitled to vote separately on the an | following statement nendment(s); |
| "The number of votes ca | st for the amendment(s) was/were sufficient for approval | t e e e e e e e e e e e e e e e e e e e |
| by | (voting group) | |
| | (voting group) | |
| 05-05, 20 Dated | | |
| Signature | 1 Diano | |
| selec | director, president or other officer—if directors or office ted, by an incorporator—if in the hands of a receiver, true inted fiduciary by that fiduciary) | |
| | MILANO ANGULO, MARIEL J | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person cloning) | |

SECRETARY OF STATE TALLAHASSEE, FL 2023 MAY 18 AH 6: 08