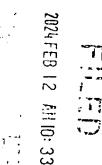
(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Sertified Copies Certificates of Status Special instructions to Filing Officer:
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Special Instructions to Filing Officer:
Office Use Only



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COVER LETTER



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Tallahassee, FL 32303

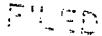
TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	ORATION: J&JMULTISER	VICE AND TAX SOLUTION	ON INC						
DOCUMENT NUM	D2400000052		·-						
The enclosed Article	s of Amendment and fee are su	abmitted for filing.							
Please return all corr	espondence concerning this ma	atter to the following:							
	JESUSDIEU, PORTILUS								
	 ·	Name of Contact Person	1						
		Λ//Δ							
		Firm/ Company							
	PO BOX 971139								
		Address							
	COCONUT CREEK, FL 330	97							
		City/ State and Zip Cod	e						
	PORTILUS07@GMAIL.CO	М							
	-	sed for future annual report	notification)						
for further informati	on concerning this matter, plea	se call:							
JESUSDIEU, PORT	ILUS	at (954	8509486						
Name	of Contact Person	Area Co	de & Daytime Telephone Number						
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:						
\$35 Filing Fee	☐ \$43.75 Filing Fee & 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)						
An	niling Address endment Section rision of Corporations	Amend	Address ment Section n of Corporations						
P.C	D. Box 6327	The Centre of Tallahassee							

Articles of Amendment to Articles of Incorporation

ī	R	1	A.	41	ı	۱ '	ľ	ς	ŗ.	ĸ	١.	71	c.	12	۸	. 1	J	Г	١,	Ŧ.	۸	٦		C	r	ì	ī	1	т	l	\cap	١	ď	13	V	(٠
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	Corporation as curren	ly filed with the Florida I	Dept, of State)							
		/ 11 /								
rsuant to the provisions of section 607-100		10241	=5 T2 AH 10: 33							
repart to the provisions of section 607 100	(Document Number	of Corporation (if known)								
Articles of Incorporation:	06, Florida Statutes, this	Florida Profit Corporatio	n adopts the following amendment(s							
If amending name, enter the new name	e of the corporation:									
& S MANAGEMENT AND TAX SOLU	TION INC.		The new							
me must be distinguishable and contain the nc.," or Co.," or the designation "Corp hartered." "professional association," or	o,'' "Inc,'' or "Co".	A professional corporatio	ed" or the abbreviation "Corp.,"							
Enter new principal office address, if a		23299 SW 60TH AVE								
rincipal office address <u>MUST BE A STR</u>		BOCA RATON, FL 33428								
Enter new mailing address, if applicate (Mailing address MAY BE A POST OF)		PO BOX 971139								
<u></u>	,	COCONUT CREEK, F	1. 33097							
If amending the registered agent and/o new registered agent and/or the new re	gistered office addres		name of the							
Name of New Registered Agent N	/A 									
N/.	A									
_	(Florida si	reet address)								
New Registered Office Address:	A		Florida							
		(City)	(Zip Code)							

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.

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		N/A	 	_
Add				_
Remove			 -	_
2) Change		N/A	 	
Add				
Remove 3) Change		N/A	 	
Add				
Remove				
4) Change		N/A	 	
Add				
Remove				
5) Change		N/A	 	
Add				
Remove				
<i>δ</i>) Change		N/A		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
- 100
-
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
N/A

• . .

. .

The date of each amendment(s) ac date this document was signed.	option:	, if other than the
Effective date if applicable:	N/A	ter amendment file date)
	(no more than 90 days aj	er amenameni jue uate)
Note: If the date inserted in this bl document's effective date on the De		utory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ado action was not required.	oted by the incorporators, or board of o	lirectors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number ficient for approval.	of votes cast for the amendment(s)
	roved by the shareholders through voti each voting group entitled to vote sepa	
"The number of votes cast	or the amendment(s) was/were sufficient	ent for approval
by N/A	·	
·,	(voting group)	·
Dated 0.2	-10-2034 MDieu Portilus	
Signature 76	MDieu Portilus	
(By'a di selected	ector, president or other officer – if di , by an incorporator – if in the hands o ed fiduciary by that fiduciary)	
	IESUSDIEU PORTILUS	
-	(Typed or printed name of p	person signing)
	PRESIDENT	
-	(Title of person signing)	