

P24000035441

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 9, 2024

DEVISON MOZER DE SOUZA
1843 GIN RICKEY CIRCLE APT 5418
OCOE, FL 34761

SUBJECT: OPTIMIZE TECHNOLOGY SOLUTIONS CORP
Ref. Number: P24000035441

We have received your document for OPTIMIZE TECHNOLOGY SOLUTIONS CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

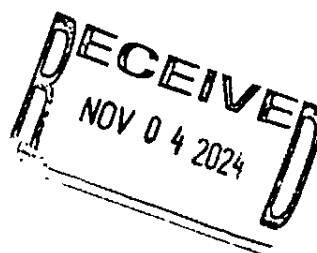
Check only one.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

SHANTELL BROWN
Regulatory Specialist II

Letter Number: 724A00022362



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: OPTIMIZE TECHNOLOGY SOLUTIONS CORP
DOCUMENT NUMBER: P24000035441

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DEIVISON MOZER DE SOUZA
Name of Contact Person

Firm/ Company
1843 GIN RICKEY CIRCLE APT 5418
Address
OCFEE/FL - 34561
City/ State and Zip Code
CONTACT@OPTIMIZE.DEV
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DEIVISON MOZER at (641) 819-2498
Name of Contact Person Area Code & Daytime Telephone Number

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

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

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

OPTIMIZE TECHNOLOGY SOLUTIONS CORP

P.24000035441

☐ 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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>X</u> Change ____ Add ____ Remove	<u>P</u>	<u>DEIVISON MOZER DE SOUZA</u>	<u>1843 GIN RICKEY CIRCLE, APT 5413 OCJOEE, FL 34761</u>
2) ____ Change ____ Add ____ Remove	_____	_____	_____
3) ____ Change ____ Add ____ Remove	_____	_____	_____
4) ____ Change ____ Add ____ Remove	_____	_____	_____
5) ____ Change ____ Add ____ Remove	_____	_____	_____
6) ____ Change ____ Add ____ Remove	_____	_____	_____

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19-11-12-17

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: 09/23/2024
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____
(voting group)"

Dated 09/23/2024

Signature DEIVISON MOZER DE SOUZA
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

DEIVISON MOZER DE SOUZA
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

2024-09-23 12:17
FILED