P24000043065

(Re	equestor's Name)	
(Ad	(dress)	· ·
(Ari	dress)	
((a.c.50)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special instructions to	Filing Officer	

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FILED

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: PREMIER CONSU	JLTING & TRAINING SC	DLUTIONS CORP		
	BER: P24000043065				
	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	BARBARA OCONNELL				
		Name of Contact Person	1		
	PREMIER CONSULTANTS & TRAINING SOLUTIONS CORP				
		Firm/ Company			
	7901 4TH STREET	Time Company			
		Address	·		
	ST. PETERSBURG, FL 3370)2			
		City/ State and Zip Cod	e		
	BARBARA@PREMIERTAX	CORP.COM			
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
BARBARA O'CON	NELL	at (800-9900		
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	urtment of State:		
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)		
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			

Articles of Amendment to Articles of Incorporation of

NS	
as currently filed with the F	lorida Dept. of State)
	2024 AUG 26 PM 1:13
t Number of Corporation (if k	mown) SECRETARY OF STATE
atutes, this <i>Florida Profit Col</i>	rporation adopts the following antendme
oration:	
	The new
oration," "company," or "inc r "Co". A professional cor tion "P.A."	corporated" or the abbreviation "Corp.," rporation name must contain the word
<u></u>	

-	
office address in Florida, en ce address:	iter the name of the
(Florida street address)	
(Florida street address)	, Florida
1 2	t Number of Corporation (if katutes, this Florida Profit Contraction: oration: orati

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.

Example: X Change	<u>PT</u>	John Doe						
X Remove	<u>V</u>	Mike Jones						
X Add	<u>sv</u>	Sally Smith	Sally Smith					
Type of Action (Check One)	Title	<u>Name</u>	<u>e</u>	<u>Addres</u> s				
1) Change	VP	ROB	ERT J BANKS	200 MERRICK ROAD				
Add				AMITYVILLE, NY 11701				
X Remove								
2) Change								
Add								
Remove 3) Change								
Add								
Remove								
4) Change								
Add								
Remove								
5) Change								
Add								
Remove				• • • • • • • • • • • • • • • • • • • •				
6) Change								
Add								
Remove								

	il sheets, if necesso	rv), (Bex	iter change(s) pecific)	nere.			
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<u>in amendmen</u>	t provides for an	<u>exchange, r</u>	<u>eclassification</u> .	<u>or cancellati</u>	on of issued s	hares,	
Ovisions for i	mplementing the cable, indicate N/	<u>amendment</u>	<u>if not contain</u>	<u>ed in the ame</u>	<u>ndment itself</u>	<u>i:</u>	
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07/31/2023	
The date of each amendment(s) adoption:	r than the
Effective date if applicable:	
(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 lis document's effective date on the Department of State's records.	ted as the
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.	er
☐ 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)	
07/31/2024 Dated	
(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)	
BARBARA O'CONNELL	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	