Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210000076063)))



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Doing so will generate another cover sheet.

	To:		٠٠)	2
		Division of Cor	porations	2021
		Fax Number	: (850)617-6380	KWF I
	From:		.	
·	, ,		: ASLAN TAX SERVICES INC	1
ć5		Account Number	: I20140800082	•
ري		Phone	: (305)644-9144	2
:		Fax Number	: (786)477-5802	
_				က္တ
				່ ທ
<u>:</u>			s for this business entity to be used for future ngs. Enter only one email address please.**	ഗ
0721.	Ema	il Address:		

COR AMND/RESTATE/CORRECT OR O/D RESIGN VEIZAGA SOFTWARE TRAINING & CONSULTING, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

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Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: VEIZAGA SOFTV	VARE TRAINING & CON	SULTING, INC					
	BER:	··						
The enclosed Articles of Amendment and fee are submitted for filing								
Please return all corr	espondence concerning this ma	tter to the following:						
	DALBIS MATOS							
	Name of Contact Person							
	ASLAN TAX SERVICES IN	IC .						
		Firm/Company						
	762 SW 18 AVE							
		Address	· • · · · · · · · · · · · · · · · · · ·					
	MIAMI, FL 33135							
		City/ State and Zip Code	:					
	DALBIS@ASLANTAXSER	VICE.COM						
	E-mail address: (to be us	sed for future annual report	notification)					
For further informati	on concerning this matter, pleas	se call:						
DALBIS MATOS		at (644-9144					
Name	of Contact Person	Area Co	de & Daytime Telephone Number					
Enclosed is a check t	or the following amount made	payable to the Florida Depo	urtment of State:					
\$35 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)					
An Dir P.C	eiling Address rendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Antend Divisio The Co 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303					

Articles of Amendment to Articles of Incorporation of

UEIZAC: V	COUTINA	DU TD	EATS/INDEED	E CONCIII	TING INC

(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
P99000069463	
(Document Numbe	r of Corporation (if known)
Pursuant to the provisions of section 607 1006, Florida Statutes, the Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation: VEIZAGA GROUP INC	<u>.</u>
-	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P	A professional corporation name must contain The word
3. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
: Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	·
(muning numbers) ment the rest of the rest	
). If amending the registered agent and/or registered office a	
new registered agent and/or the new registered office addr	<u>'ess:</u>
Name of New Registered Agent	
(Flavida	street address)
i ibrita	i su cer unu essy
New Registered Office Address:	, Florida
	(City) (Zip Code)
Tew Registered Agent's Signature, if changing Registered Age hereby accept the appointment as registered agent. I am familie	
nereos accept the appointment as registered agent. I am jamith	ur with and accept the obligations of the position.
Signature of Nev	w Registered Agent, if changing
Signature of Net	Frequence rigery y enunging
Check if applicable	
\square The amendment(s) is/are being filed pursuant to s. 607.0120 (1	(1) (e) FS

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, Sully 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	7.	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)Change			
Add			
Remove			
2) Change			-
Add			
Remove 3) Change			
Add			
Remove			
4) Change			-
Add			
Remove			
5) Change		_	<u> </u>
Add			
Remove			
の Change			
Add			
Remove			

If amending or adding additional Arti Attach addinonal sheets, if necessary).	(Be specific)
	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(),	
 	

9 07/1/2021 10:08·AM · Fax Services	→ 18506176380	pg 7 of 7
The date of each amendment(s) adoption:	JANVARY 7TH 2021	if other than the

The date of each amendment(s) adoption:	PARVARI		7021	if other than the
date this document was signed.	-			
Effective date if applicable:	TANUARY	-4 in 5	2921	
(no)	nore than 90 days after	amendment file a	tate)	
Note: If the date inserted in this block does not mee document's effective date on the Department of State	et the applicable statutes records.	ory filing requires	nents, this date wi	ill not be listed as the
Adoption of Amendment(s) (CHECK	ONE)	,		
☐ The amendment(s) was/were adopted by the incorpaction was not required.	crators, or board of dir	ectors without sha	archolder action an	d shareholder
The amendment(s) was/were adopted by the shareh by the shareholders was/were sufficient for approv	olders. The number of	votes cast for the	: amendment(s)	
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group	holders through voting entitled to vote separa	groups. The followed	owing statement lment(s):	
"The number of votes east for the amendmen	(s) was/were sufficien	t for approval		
by(voting gre	nip)	·"		
DatedSANUARY	10, 2021	,	ļ	
Signature X				
(By a director, president o selected, by an incorporat appointed fiduciary by the	Or – if in the hands of a	tors or officers be receiver, trustee,	or other court	
SANDRA BEATE	 Z VEIZAGA 			
	or printed name of per	son signing)		
PSTD	person signing)			
(Tine o	person signing)			
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