V47833

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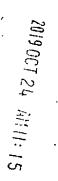
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TO: Amendment Section

Division of Corpo	prations				
NAME OF CORPOR	RATION: $ \sim $	of Cosporation			
DOCUMENT NUME	BER: <u>V47</u>	433			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
		Name of Contact Person	119-		
	^	Name of Contact Person	n		
	/-ln.	ic Solutions LC	<u>C</u>		
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	2645 NE 2075+ Address				
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Address A venture, Fig. 3 3 18 0 City/ State and Zip Code					
	Range	: D'Sellsouthinel			
	E-mail address: (to be us	sed for future annual report	notification)		
•	n concerning this matter, pleas		2.52		
	of Contact Person	at (<u>/</u> //6	de & Daytime Telephone Number		
Name (or Contact Person	Alea Co	de & Daytine Telephone Number		
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	ling Address endment Section		Address Iment Section		

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

2661 Executive Center Circle Tallahassee. FL 32301

Clifton Building

Articles of Amendment

to

Articles of Incorporation

of

	larss (rpapelion	d. D. a. (Ca.a.)			
		tly filed with the Flori	ida Dept. of State)			
	147833	of Corporation (if know	<u></u>			
		•				
Pursuant to the provisions of section 607,1006, F its Articles of Incorporation:	lorida Statutes, this	s Florida Profit Corpo	ration adopts the fo	llowing a	mendm	ent(s) to
A. If amending name, enter the new name of t	he corporation:					
					he nev	
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," o	Corp." "Inc," or	"Co". A professional	"incorporated" or corporation name	the abbr must con	eviatio tain th	n e
B. Enter new principal office address, if applie					23	
(Principal office address <u>MUST BE A STREET</u>	ADDRESS)			<u> </u>	1061	,
						,•
C. Enter new mailing address, if applicable:					<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)				.		!
						
D. If amending the registered agent and/or registered agent and/or the new regist			the name of the			
	ered bliner addres	,,,,				
Name of New Registered Agent			_			
						
	(Florida s	treet address)				
New Registered Office Address:			, Florida	.7:		
		(City)		(Zip Coa	(e)	
New Registered Agent's Signature, if changing	Registered Agen	ıt:				
I hereby accept the appointment as registered ag			bligations of the pos	ition.		
	Signature of New	Registered Agent, if ch	anging			

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	n Doe	
X Remove	<u>V</u> <u>Mik</u>	<u>e Jones</u>	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	Raffi Anne	7645 NE 2075+
X Add			7645 NE 2075+ Aventura, Fo 73160
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)	ere:	
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an amendment provides for an excl	nange, reclassification,	or cancellation of issu	ted shares,
an amendment provides for an exclusions for implementing the amount of the applicable, indicate N/A)	nange, reclassification, andment if not containe	or cancellation of issu d in the amendment i	ied shares, tself:
provisions for implementing the amo	nange, reclassification, endment if not containe	or cancellation of issu d in the amendment i	ied shares, tself:
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provisions for implementing the amo	nange, reclassification, indment if not containe	or cancellation of issu	ted shares,
f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, and ment if not containe	or cancellation of issu	ted shares, tself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> : (no more than 90 days after	
(no more than 90 days after	amendment file date)
Note: If the date inserted in this block does not meet the applicable statute document's effective date on the Department of State's records.	ory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separate	
"The number of votes cast for the amendment(s) was/were sufficient	for approval
by(voting group)	·**
(voting group)	
 □ The amendment(s) was/were adopted by the board of directors without sha action was not required. □ The amendment(s) was/were adopted by the incorporators without shareho 	
action was not required.	
Dated /0/22/19	
Signature	
(By a director, president or other officer – if director, president or other officer – if direct selected, by an incorporator – if in the hands of a appointed fiduciary by that fiduciary)	
(Typed or printed name of per	li Agac
(Typed or printed name of per	son signing)
(Title of person signature)	
(Title of person signal	gning)

the