P150000 11285

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 27 2015

COVER LETTER

TO: Amendment Section

Division of Corporations FEDCOM INC NAME OF CORPORATION: DOCUMENT NUMBER: P15000011285 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: FEDERICO ROSSI Name of Contact Person FEDCOM INC Firm/Company 1820 N CORPORATE LAKES BLVD SUITE 207 Address WESTON, FL 33326 City/ State and Zip Code fedcomusa@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: FEDERICO ROSSI Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

FEDCOM INC					
(Name P15000011285	of Corporation as current	ly filed with the Florida Dept. of State)	_		
	(Document Number of	of Corporation (if known)			
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the following	ng amendmen		
A. If amending name, enter the new n	ame of the corporation:				
			The new		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or		contain the		
B. Enter new principal office address, if applicable:		1820 N CORPORATE LAKES BLVD SUITE 207			
(Principal office address <u>MUST BE A S</u>	(Principal office address <u>MUST BE A STREET ADDRESS</u>)		WESTON FL, 33326		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1820 N CORPORATE LAKES BLVD SUITE 207			
		WESTON FL 33326			
D. If amending the registered agent ar new registered agent and/or the ne			 ℧ i 3		
Name of New Registered Agent	PADGETT BUSINESS S	ERVICES	AU		
	1820 N CORPORATE LAKES BLVD SUITE 206-10		_ - 26		
	(Florida street address)		_ 0, % 0= %		
New Registered Office Address:	WESTON	. Florida 33326	= ± € €		
	(City) (Zip		Code S		
			DA		
New Registered Agent's Signature, if c	hanging Registered Agent	<u>:</u>			
I hereby accept the appointment as regist	tered agent. I am familiar	with and accept the obligations of the position.	_		
	Signature of New	distand Agent if changing			

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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	D	NELSON ANDRADE	322 CONSERVATION DR
X Add			WESTON, FL 33327
Remove			
2) Change			
Add			
Remove			SECTION SECTIO
3) Change			5 编句
Add			o 23.53.
Remove			
4) Change			DRIDA L L J
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary). (Be specific)		
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	PH	-11
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	င္မ	
provisions for implementing the amendment if not contained in the amendment itself:	_	25
(if not applicable, indicate N/A)		>
		_
		_
		_
		_
		_
		_

8/24/2015		
	_, if ot	her than the
date this document was signed. 8/24/2015		
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 a document's effective date on the Department of State's records.	not be	listed as the
Adoption of Amendment(s) (CHECK ONE)		
☐ 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)	ऊ	E SE
(voting group)	SUÀ	22
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	26	FILE TARY O
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	PH 3: 4	D F STA
8/24/2015 Dated	_	DA ME
Signature (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)		
FEDERICO ROSSI		
(Typed or printed name of person signing)		
PRESIDENT		
(Title of person signing)		