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: (850)617-6380

From:

Account Name : SORSHER & ASSOCIATES, LLC.

Account Number : I20170000056 Phone : (954)842-2931 Fax Number : (954)842-2936

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COR AMND/RESTATE/CORRECT OR O/D RESIGN ALPHA AUGMENTED SERVICES, INC.

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	ORATION: ALPHA AUGMEN	TED SERVICES, INC.	
DOCUMENT NUM	1BER:		
	es of Amendment and fee are sub	omitted for filing.	
Please return all corr	respondence concerning this mat	ter to the following:	
	ROSSETTI, MASSIMO		
		Name of Contact Person	
	ALPHA AUGMENTED SER	VICES, INC.	
		Firm/ Company	
	800 BRICKELL AVE., 4TH	, ,	
		Address	
	MJAMI, FL 33131		
		City/ State and Zip Code	3
	massimo.rossetti@hotmail.co	om	
	-	ed for future annual report	notification)
For further information ROSSETTI, MASS	tion concerning this matter, pleas	se call:	930-4736
Nam	ne of Contact Person	Area Co	de & Daytime Telephone Number
	for the following amount made	payable to the Florida Dep	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
م <u>C</u> P	Agiling Address Amendment Section Division of Corporations 2.O. Box 6327 Callahassee, FL 32314	Amend Division The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) P21000095770 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Thue new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co", A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new malling address, if applicable: (Malling address MAY BE A POST OFFICE BOX)	ALPHA AUGMENTED SERVICES, INC.	
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new registered agent and/or the new registered office address:	D. If amending the registered agent and/or registered office address in Florida, enter the name of the	選号
	new registered agent and/or the new registered office address:	(*)
Name of New Registered Agent	Name of New Registered Agent	
(Florida street address)	(Florida street address)	
New Projective of Office Address:	N. Buring J. Office Address: Florida	
New Registered Office Address:, Florida	New Registered Office Address.	
New Registered Agent's Signature, if changing Registered Agent:	New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Signature of New Registered Agent, if changing	Signature of New Registered Agent, if changing	
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	

address of each Officer's (Attach additional sheets, Please note the officer/dir P = President; V = Vice F Executive Officer; CFO = President, Treasurer, Dire Changes should be noted a change. Mike Jones lear Mike Jones, V as Remove,	ind/or D if necess ector title President Chief Fi ector wor in the fo ves the c	erry) e by the first letter of the office title: ; T= Treasurer; S= Secretary; D= Director; TR= Tru inancial Officer. If an officer/director holds more than o uld be PTD. Ilowing manner. Currently John Doe is listed as the PS orporation, Sally Smith is named the V and S. These sh	stee; C = Chairman or Clerk; CLO - Chief one title, list the first letter of each office held. ST and Mike Jones is listed as the V. There is
Example: X Change	<u>PT</u>	<u>John Doe</u>	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action	<u>Title</u>	Name .	Address
(Check One) 1) Change	VP	PEACH, JOACHIM	800 BRICKELL AVE.,
Add			4TH FLOOR
<u> </u>			MIAMI, FL 33131
Remove	VP	PAECH, JOACHIM	800 BRICKELL AVE.,
2) Change X			4TH FLOOR
Add			MIAMI, FL 33131
Remove 3)Change			
Add			
Remove			
4) Change	-		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
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f an amendment provides for an ex-	change, reclassification, or cancellation of issued shares,	
provisions for implementing the an	nendment if not contained in the amendment itself:	
f an amendment provides for an exprovisions for implementing the an (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:	
provisions for implementing the an	nendment if not contained in the amendment itself:	
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provisions for implementing the an	nendment if not contained in the amendment itself:	

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file d	ale)
Note: If the date inserted in this block does not meet the applicable statutory filing requiren document's effective date on the Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without sha action was not required.	reholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following the separately provided for each voting group entitled to vote separately on the amend	owing statement ment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
03/10/2022 Dated	
Signature Massimo Rossetti	
(By a director, president or other officer - if directors or officers he selected, by an incorporator - if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)	
ROSSETTI, MASSIMO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	