

P210000095770

Division of Corporations
Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6380

From:
Account Name : SORSHER & ASSOCIATES, LLC.
Account Number : I20170000056
Phone : (954)842-2931
Fax Number : (954)842-2936

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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SECRETARY OF STATE
TALLAHASSEE, FL

2022 MAR 11 AM 10:46

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2022 MAR 11 PM 4:27
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TALLAHASSEE, FL

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

Certificate of Status	0
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Estimated Charge	\$35.00

Amend

MAR 16 2022
I ALBRITTON

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ALPHA AUGMENTED SERVICES, INC.

DOCUMENT NUMBER: P21000095770

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROSSETTI, MASSIMO

Name of Contact Person

ALPHA AUGMENTED SERVICES, INC.

Firm/ Company

800 BRICKELL AVE., 4TH FLOOR

Address

MIAMI, FL 33131

City/ State and Zip Code

massimo.rossetti@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROSSETTI, MASSIMO

Name of Contact Person

at (305)

930-4736

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 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)

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

ALPHA AUGMENTED SERVICES, INC.

(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:

The 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 mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address: _____, Florida
(City) (Zip Code)

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.

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.

FILED
2022 MAR 11 AM 10:46
FLORIDA DEPT. OF STATE
TALLAHASSEE, FL

1) <input type="checkbox"/> Change	VP	PEACH, JOACHIM	800 BRICKELL AVE.,
<input type="checkbox"/> Add			4TH FLOOR
<input checked="" type="checkbox"/> Remove			MIAMI, FL 33131
2) <input type="checkbox"/> Change	VP	PAECH, JOACHIM	800 BRICKELL AVE.,
<input checked="" type="checkbox"/> Add			4TH FLOOR
<input type="checkbox"/> Remove			MIAMI, FL 33131
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

[illegible]

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 date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.
- ☐ 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)

03/10/2022
Dated _____

Signature Massimo Rossetti
(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)

ROSSETTI, MASSIMO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)