(R	equestor's Name)
(Ai	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	usiness Entity Name)
(3.	
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
4.C ·	HORNE UU - 6 2025
	9707 9 - 9∩¥
	Office Use Only



900450949859

UBANEO

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 120000000195 REFERENCE : AUTHORIZATION COST LIMIT : ORDER DATE: 8/5 ORDER TIME : ORDER NO. : CUSTOMER NO: Amendment Officer Charrige NAME: PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY _ PLAIN STAMPED COPY CONTACT PERSON:

EXAMINER'S INITIALS:

COVER LETTER

TO: Amendme	nt Section Division of Corporatio	ns	
SUBJECT:	3 Commun.	CATIONS. IN	1C.
	Name	от Согрогаціон	
DOCUMENT NU	mber: <u>F 14000</u>	000/537	
The enclosed Amen	dment and fee are submitted for	filing.	
Please return all cor	respondence concerning this mat	ter to the following:	
Nichola	Name of Contact Person	4	
A3 Com	1MUNICATIONS Firm/Company	INC.	
267012	1chmono Rope	<u> </u>	
BEDFORE	City/State and Zip Code	13 44146	
L/CENS/	NG COOKANOR s: (to be used for future annual re	BOARDINAN. COP port notification)	1
For further informat	tion concerning this matter, please	e call:	
Nicholas P Name	of Contact Person	at (216) 755-7. Area Code & Daytime T	206 02216-9 70-4585 elephone Number
Enclosed is a check	for the following amount:		
□\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy	☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

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

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)	
	50
(Document number of corporation (if known)	
1_A3 COMMUNICATIONS, INC.	
(Name of corporation as it appears on the records of the Department of State)	
1. A3 (cmmunication as it appears on the records of the Department of State) (Name of corporation as it appears on the records of the Department of State) 2. SOUTH CAROLINA (Incorporated under laws of) (Date authorized to do business in Flo	9
(Incorporated under laws of) (Date authorized to do búsiness in Fío	rida)
SECTION II	
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)	
4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction incorporation?	of
5. (Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate not contained in new name of the corporation)	abbreviation, if
(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business i	n Florida)
6. If the amendment changes the period of duration, indicate new period of duration.	
(New duration)	
7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.	
(New jurisdiction)	
8. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:	
9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change: BRIAN Thomas - Remove From Listing	

CHIEF SALES OFFICER (CSO)

Title/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
	BRIAN Thomas	3064 SALEMIA	DAdd DOSTRIAC DRIVE
	WIN	STON SALEM, NC 271	
			□Add
			□Remove
			□Add
			□Remove
			□Add
			©Remove
			□Add
			□Remove
10. Attached is a of the applicat	certificate or document of similar impo tion to the Department of State, by the Se s of which it is incorporated.	ort, evidencing the amendment, authentical ecretary of State or other official having cu	ated not more than 90 days prior to delivery stody of corporate records in the jurisdiction
	Hechole 61	eamol-	
Nich	(Signature of a d a receiver or oft what P. GIANCOLA	lirector, president or other officer - if in the ner court appointed fiduciary, by that fidu DIRECTER	ciary) Confort Compliance of person signing)
	(Typed or printed name of person signi	ng) (Title	of person signing)

FILING FEE \$35.00

COVER LETTER

TO: Amendm	ent Section Division of Corporat	ions	
SUBJECT:	43 Commun	ICATIONS, IN	JC.
	11411	c or corporation	
DOCUMENT NU	JMBER: <u>/- /400</u>	<u>060/537 </u>	<u> </u>
The enclosed Ame	endment and fee are submitted fo	r filing.	
Please return all co	orrespondence concerning this ma	atter to the following:	
Nichol	Name of Contact Person	<u> </u>	
A3 Co,	mmひル1cAT1CN Firm/Company	S. INC.	
26701 1	Richmond Rops	o	
BEDFOR	City/State and Zip Code	17 44146	
L/CEUS. E-mail addre	Sess: (to be used for future annual i	BOAROMAN. CON	1
For further inform	ation concerning this matter, plea	se call:	
Aletala :	P. C. Adams 1 A	216 700	1208:02216-970-4585
	e of Contact Person	Area Code & Daytime	Telephone Number
Enclosed is a chec	k for the following amount:	·	
□\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy	☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

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