L46675

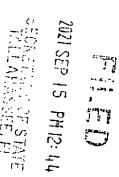
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A. Butter

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: Sencommunications, Inc. DOCUMENT NUMBER: L46675 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Stacie Miller Name of Contact Person Sencommunications, Inc. Firm/ Company 2908 Florida Palm Drive Address Tampa Florida, 33619 City/ State and Zip Code Afrierson@sencomm.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Stacie Miller at (813) 436-5015
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 & **□\$4**3.75 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

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment Articles of Incorporation



	of 15 🗀 🚺
Sencommunications, Inc.	2821 SER LE 10410 + 4
(Name of Corporation as o	currently filed with the Florida Dept. of State) Fit 12: 44
Sencommunications, Inc.	-EORETHING OF STAYE
(Document No	umber of Corporation (if known) 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10
Pursuant to the provisions of section 607.1006, Florida Statut ts Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corpora	ution:
N/A	The new
	tion," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word n "P.A."
B. Enter new principal office address, if applicable:	9208 Florida Palm Drive
Principal office address MUST BE A STREET ADDRESS	Tampa Florida 33619
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9208 Florida Palm Drive
	Tampa FL 33619
 If amending the registered agent and/or registered offine new registered agent and/or the new registered office: 	
N/A	<u>address</u>
Name of New Registered Agent	
	larida struct address)
NI/A	lorida street address)
(F1 New Registered Office Address:	orida street 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.

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)

Add

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 <u>PT</u> John Doc X Remove <u>V</u> Mike Jones \underline{X} Add SVSally Smith Type of Action Title <u>Name</u> <u>Addres</u>s (Check One) Paul W. Senory 9208 Florida Palm Drive 1) X Change Tampa FL 33619 ____ Add Remove 2) X Change Frances F. Senory 9208 Florida Palın Drive Tampa FL 33619 ___ Add Remove 3) <u>X</u> Change **VSTD** William Miller 9208 Florida Palm Drive Tampa FL 33619 ___ Add __ Remove 4) X Change PD Stacie Miller 9208 Florida Palm Drive Tampa FL 33619 ___ Add ____ Remove 5) ____ Change ____ Add __ Remove 6) ____ Change

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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
· ·		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date	2)
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirement partment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sharel	nolder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the an officient for approval.	nendment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendme	
"The number of votes cast N/A by	for the amendment(s) was/were sufficient for approval	
	(voting group)	
9/10/21 Dated	Locie Mulli	
selecte	irector, president or other officer – if directors or officers have d, by an incorporator – if in the hands of a receiver, trustee, or ted fiduciary by that fiduciary)	
	Stacie Miller	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	