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Office Use Only

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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: Mobile E | ducation Ex | change Inc |
|--|--|--|
| DOCUMENT NUMBER: N14000010 |)153 | |
| The enclosed Articles of Amendment and fee are sub | omitted for filing. | |
| Please return all correspondence concerning this matt | ter to the following: | |
| Fabiano Destri Lobo | | |
| | (Name of Contact Perso | on) |
| Mobile Education Excha | inge Inc | |
| | (Firm/ Company) | |
| 7700 N Kendall Drive Sเ | uite 200 | |
| | (Address) | |
| Miami, FL 33156 | | |
| | (City/ State and Zip Cod | de) |
| fdlobo@me.com | | |
| E-mail address: (to be use | d for future annual report | notification) |
| For further information concerning this matter, please | e call: | |
| Nancy L Brown | _{at (} 305 | , 274-4814 |
| (Name of Contact Person) | (Area C | Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount made p | ayable to the Florida Deg | partment 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 | Amen Divisi Clifto | t Address dment Section on of Corporations n Building Executive Center Circle |

Tallahassee, FL 32301





November 21, 2014

Fabiano Desti Lobo Mobile Education Exchange Inc 7700 N. Kendall Drive, Suite 200 Miami, FL 33156

SUBJECT: MOBILE EDUCATION EXCHANGE INC

Ref. Number: N14000010153

We have received your document for MOBILE EDUCATION EXCHANGE INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P04000029295.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey Regulatory Specialist II

Letter Number: 514A00024780



December 3, 2014

Florida Department of State Division of Corporations P O Box 6327 Tallahassee, FL 32314

RE:

Mobile Education Exchange Inc

Ref Number: N14000010153

Dear Ms. Ramsey:

I am writing you on behalf of the above referenced corporation which wishes to change its name. You letter advised that EDX Inc is not available. We have corrected the name change to read EDX Corp which appears to be available according to Sunbiz.org.

Accordingly, we are returning the Amended Articles of Incorporation for processing.

If you have any questions, please contact us.

Very truly yours,

Nancy L Brown

Certified Public Accountant

Articles of Amendment to Articles of Incorporation of

FILED.

| | VI | | _ |
|---|--|---|--------|
| Mobile Education Exchange Inc | | 2814 DEC -8 PM 4: 2 | .3 |
| (Name of Corporation as currently | filed with the Florida Dept. of State) | crai | C |
| N14000010153 | , | TATLAHASSEE. FLOR | ıĎa |
| (Docum | nent Number of Corporation (if known) | 10% | |
| Pursuant to the provisions of section 617.10 amendment(s) to its Articles of Incorporation | 06, Florida Statutes, this <i>Florida Not For F</i> on: | rofit Corporation adopts the follow | wing |
| A. If amending name, enter the new nam | e of the corporation: | | |
| EDX Work | dwide Inc | The | new |
| name must be distinguishable and contain t. <u>"Company" or "Co." may not be used in t</u> l | he word "corporation" or "incorporated" . | or the abbreviation "Corp." or "I | 1C. '' |
| | | | |
| B. Enter new principal office address, if (Principal office address MUST BE A STR | | | |
| Frincipul office undress MOST BE ASTR | (CET ADDRESS) | | |
| | | | |
| | | . | |
| C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF | | | |
| (maining dauress MAT BE A FOST OF | THEE BOX) | | |
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| | | | |
| D. If amending the registered agent and/ | or registered office address in Florida, en | tar the name of the | |
| new registered agent and/or the new i | | ter the name of the | |
| Name of New Registered Agent: | | | |
| name of New Negamerea rigem. | | | |
| - | (Florida street address) | • | |
| New Registered Office Address: | , | | |
| | | , Florida | |
| _ | (City) | (Zip Code) | _ |
| New Registered Agent's Signature, if cha | nging Registered Agent | | |
| | red agent. I am familiar with and accept the | e obligations of the position. | |
| | | | |
| | Signature of New Registered Agent, if chan | ging | |

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: XChange X Remove X Add | <u>PT</u> <u>V</u> <u>SV</u> | John Doe Mike Jones Sally Smith | | |
|---------------------------------|------------------------------------|---------------------------------------|--|----|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s | |
| 1) X Change | P D | Fabiano Destri Lo | obo 7700 N Kendall Drive Ste 20 |)0 |
| Add | | | Miami, FL 33156 | |
| Remove | | | | |
| 2) Change | • | | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | | <u> </u> | |
| Add | | | | — |
| Remove | | | | |
| 4) Change | | ··· | | |
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| 5) Change | | | | |
| Add | | - | · · · · · · · · · · · · · · · · · · · | _ |
| Remove | | | | _ |
| Komovo | | | | |
| 6) Change | | | | |
| Add | | | | |
| Remove | | | | |

| f amending or adding additional attach additional sheets, if necessar | y). (Be specific) | | | | |
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| The date of each amendment(s) adoption: 10-31-2014 date this document was signed. | | | , if other than the | |
|---|--|---|---------------------|--|
| Effective date if applicable: | | • • | | |
| | | (no more than 90 days after amendment file date) | | |
| Ado | option of Amendment(s) | (<u>CHECK ONE</u>) | | |
| | The amendment(s) was/w was/were sufficient for ap | were adopted by the members and the number of votes cast for the amendment(s) oproval. | | |
| | There are no members or adopted by the board of o | members entitled to vote on the amendment(s). The amendment(s) was/were lirectors. | | |
| | Dated 11- | 2014 | | |
| | Signature 🗹 | MIHOV | <u>.</u> | |
| | have n | chairman or vice shairman of the board, president or other officer-if directors not been selected, by an incorporator — if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary) | | |
| | Fabiano [| Destri Lobo | | |
| | , | (Typed or printed name of person signing) | | |
| | President | /Director | • | |
| | | (Title of person signing) | | |