P04 000 137157

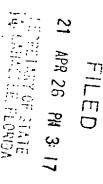
(Requ	iestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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Mark

COVER LETTER

TO: Amendment Sec Division of Corp		u*		
NAME OF CORPO	RATION: KPM Communicat	ions, Inc.		
	BER: P04000137157			
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	Kari Monty			
		Name of Contact Person		
	KPM Communications, Inc.			
	Firm/ Company			
1125 SW Forest Hill Cove				
		Address		
	Port Saint Lucie, FL 34986			
		City/ State and Zip Code	:	
	kari@kpmcom.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
Kari Monty		at (772	349-3930 Lie & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	S43.75 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	
		Amend	ment Section	
			n of Corporations	
		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

KPM Communications, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P04000137157 (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.

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:

X Change	<u>PT</u>	<u>John Doe</u>
X Remove	$\underline{\mathbf{V}}$	Mike Jones
X Add	\underline{SV}	Sally Smith
Type of Action (Check One)	<u>Title</u>	Name Address
1) X Change	PST	Name Change Kari Keene to Kari M 1125 SW Forest Hill Cove
Add		MONTY Port Saim Lucie, FL 34986
Remove		<u> </u>
2) Change		
Add		
Remove 3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

	mending or adding additional Article ach additional sheets, if necessary). — (Be specific)
		
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٠.,	n arrandment respider for an archive	ge, reclassification, or cancellation of issued shares,
	existence for implementing the amond	ge, reclassification, or cancenation of issued snares,
al Ord	(if not applicable, indicate N/A)	ment 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 date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, t Department of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholde	er action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amend sufficient for approval.	mem(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following safor each voting group entitled to vote separately on the amendment(s)	talement :
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selec	director, president or other officer – if directors or officers have not lead, by an incorporator – if in the hands of a receiver, trustee, or other officer following by that fiduciary)	peen Court
	Kari Monty	
	(Typed or printed name of person signing)	
	PST	
	(Title of person signing)	