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Amend CC Tall. 14

COVER LETTER

TQ: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Banza	i, Inc		
DOCUMENT NUMB	ER:			
The enclosed Articles	of Amendment and fe	e are submitted for fil	ing.	
Please return all corres	pondence concerning	this matter to the follow	owing:	
	Adithep Tree	rattakool		
	<u> </u>		ontact Person	
	Banzai, Inc.	T (MILLO OT C		
•		Firm/	Company	
	3208 LAKE			
•		Ac	ldress	
	Melbourne, F	FL 32934		
• •		City/ State	and Zip Code	
	AANTATEL	@ UOTMATI	Cald	
<u> </u>		. O HOTMAIL		
	E-maii address: (to be used for future a	innuai report	notification)
For further information	concerning this matte	er, please call:		
Adithep Treerattakool		at	₍ 321	, 757-9809
Name of Contact Person				le & Daytime Telephone Number
Enclosed is a check for	the following amount	t made payable to the	Florida Depar	tment of State:
\$35 Filing Fee	□\$43.75 Filing F Certificate of S		Copy al copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section				Address
Amei		Amendment Section		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

·	articles of Amendmen	ıt		
. Am	to ticles of Incorporation	an .		
↑	of			
\cdot $ -$	air	NC_		
(Name of Corporation as currently filed	with the Florida De	pt. of State)		
004000	14813	2		
(Document Number of Co	orporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	tatutes, this <i>Florida P</i>	<i>rofit Corporation</i> ado	pts the following	g amendment(s) to
A. If amending name, enter the new name of the corp	ooration:			
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co" A			
B. Enter new principal office address, if applicable:				
(Principal office address <u>MUST BE A STREET ADDR</u>	ESS)			上海点
	_			3 190
	***************************************			♦
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				3 7
	_			
				
		· · · · · · · · · · · · · · · · · · ·		-
D. If amending the registered agent and/or registered	l office address in Flo	orida, enter the name	of the	
new registered agent and/or the new registered of				
Name of New Registered Agent				
	(Florida street address	5)		
New Registered Office Address:		, Florida		
New Registerea Office Address.	(City)	, riorida	(Zip Code)	,
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a		accept the obligations	of the position.	
		- -		
Signature of New	Registered Agent, if c	hanging		

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:

(Atlach 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:

Example: X Change	PT John D	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike J</u>	lones	
_X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>P</u>	Nattawut Sridranop	1939 Sherbourn St.
Add			Lewisville, TX 75067
X Remove			TX, 75067
2) Change	VP	Sombat Souphakhot	8124 82nd Avenue
Add			North Seminole, FL 33777
X Remove		,	FL, 33777
3) Change	P	Adithep Treerattakool	3147 Arden Circle
X Add			Melbourne
Remove			FL 32934
4) Change	<u>VP</u>	Paweena Treerattakool	3147 Arden Circle
X Add			Melbourne
Remove			FL 32934
5) Change			
Add			
Remove			
6) Change			- Providence
Add			
Remove			

 If amending or additional she 	ng additional Artic ets, if necessary).	cies, enter chan (Be specific)	ge(s) here:			
·N/Α						
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				-		
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. If an amendment pr	ovides for an exch	ange, reclassifi	cation, or ca	ncellation o	f issued sha	res,
provisions for impl (if not applicable	le, indicate N/A)	<u>nament it not c</u>	ontained in i	ne amenom	ent itseii:	
V/A						
						
						·····
··						
			_			
· -		 _				

The date of each amendment(s) a date this document was signed.	doption:	_, ii omer man t
Effective date if applicable:		_
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes case	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated_05/3	0/14	
Signature	Jan mod	
(By a selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	_
	Adithep Treerattakool	
	(Typed or printed name of person signing)	_
	President	
	(Title of person signing)	_