P0900017298

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Wisdom Connection	ons, Inc.	
DOCUMENT NUME	P09000017298		
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return zil corre	spondence concerning this ma	tter to the following:	
	Marjorie Chang		
		Name of Contact Person	n
	Wisdom Connections, Inc.		
		Firm/ Company	
	10742 Lake Jasmine Dr.		
		Address	
	Boca Raton, FL 33498		
		City/ State and Zip Cod	c
meha	ng@wizconnections.com		\checkmark
	E-mail address: (to be u	sed for future annual report	notification)
For further information	n concerning this matter, plea	se call:	
Marjorie Chang		at (⁵⁶ 1	251-5727
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payzble to the Florida Depa	estiment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Cls43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mai	ling Address	Street	Address
Amendment Section		Amendment Section	
Divi	sion of Corporations	Division of Corporations	
P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

Wisdom Connections, Inc.

(Name of Corporation as currently	filed with the Florida Dept.	of State)
P09000017298		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation add	opts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		The new
name must be distinguishable and contain the word "corporation		
"Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "I		ion name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	ASS TO THE
		SSET OF THE
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	7 2: 17
D. If amending the registered agent and/or registered office addre		e of the
new registered agent and/or the new registered office address:	W/A	
Name of New Registered Agent	19 H.	
(Florida stre	က ဝင်င်ကာ)	<u>. </u>
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 w	ith and accept the obligations	of the position.
Signature of New Re	egistered Agent, if changing	

If amending the Officers and/or Directors, exter the title and mane 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.

<u>X</u> Change	PT John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Salt	y Smith	
Type of Action (Check One)	Take	Name	Address
1) X Change	CEO	Marjoric Chang	10742 Lake Jasmine Dr
Add			Boca Raton, FL 33498
Remove			
2) Change	P	Pablo Mendez	10742 Lake Jasmine Dr
X Add			Boca Raton, FL 33498
Remove			
3) Change			
Add			
Remove			
4)Change			
Add			
Remove			<u> </u>
5) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
6) Change			
Add			
Remove			····

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an amendment provides for an exchange, rec	rissification, or cancellation of issued shares.
	dassification, or cancellation of issued shares, if not contained in the amendment itself:
rovisions for implementing the amendment it	
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The date of each amendment(s)	adoption:	if other than th
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this da Department of State's records.	se will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(sufficient for approval.	s)
	approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	eni
"The number of votes ca	est for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and sharehold	er
□ The amendment(s) was/were a action was not required.	idopted by the incorporators without shareholder action and shareholder	
June 30. Dated		
Signature	Mayone Chang	
selec	a director, president or other officer — if directors of officers have not been sted, by an incorporator — if in the hands of a receiver, trustee, or other countries fiduciary by that fiduciary)	1
	Marjoric Chang	
	(Typed or printed name of person signing)	<u> </u>
	Secretary	
	(Title of person signing)	