# P090000 45433

| (Re                                     | equestor's Name)   |           |  |  |
|---|--------------------|-----------|--|--|
| (Ac                                     | ddress)            |           |  |  |
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| (Ci                                     | ty/State/Zip/Phone | #)        |  |  |
| PICK-UP                                 | ☐ WAIT             | MAIL      |  |  |
| (Bı                                     | usiness Entity Nam | ne)       |  |  |
| (Document Number)                       |                    |           |  |  |
| Certified Copies                        | _ Certificates     | of Status |  |  |
| Special Instructions to Filing Officer: |                    |           |  |  |
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Office Use Only



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# **COVER LETTER**

| Division of Corporations   |
|--|
| NAME OF CORPORATION: LT COMMUNICATION INC  |
| DOCUMENT NUMBER: P09000 45437  |
| The enclosed Articles of Amendment and fee are submitted for filing.   |
| Please return all correspondence concerning this matter to the following:  |
| Theodore Donaid Fullet  Name of Contact Person  LT Communications Inc  |
| Name of Contact Person   |
| LT Communications INC  |
| Firm/ Company  |
| 2704 Formed Crest Circle   |
| Letz = 1 33549   |
| Lutz FL 33549  |
| City/ State and Zip Code   |
| Hed e LTCoM21. Com  E-mail address: (to be used for future annual report notification)   |
| E-mail address: (to be used for future annual report notification)   |
| For further information concerning this matter, please call:   |
| Tkeodore Dono W Filler at (813), 480 7442  Name of Contact Person Area Code & Daytime Telephone Number   |
| Name of Contact Person Area Code & Daytime Telephone Number  |
| Enclosed is a check for the following amount made payable to the Florida Department of State:  |
| \$35 Filing Fee Certificate of Status Certified Copy (Additional Copy enclosed)  \$43.75 Filing Fee & Certified Copy (Additional Copy (Additiona |

#### Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

is enclosed)

## Articles of Amendment

Articles of Incorporation

| i To Contract   | Nicotions INUS: 17 MII:55  |
|---|--|
|   | on as currently filed with the Florida Dept. of State)                 |
| P 090000 454  |  |
|   | ent Number of Corporation (if known)                                   |
| Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:  | Statutes, this Florida Profit Corporation adopts the following amendme |
| A. If amending name, enter the new name of the co   | rporation:   |
| name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp., word "chartered," "professional association," or the above the principal office address, if applicable: (Principal office address MUST BE A STREET ADD.) | N/A  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)  |  |
| <ul> <li>If amending the registered agent and/or registered<br/>new registered agent and/or the new registered of</li> </ul>  |  |
| Name of New Registered Agent  | M/A  |
|   | (Florida street address)   |
| New Registered Office Address:  | . Florida Florida  |
|   | am familiar with and accept the obligations of the position.           |
| Signa   | tture of New Registered Agent, if changing                             |

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name 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 = Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each 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. The 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 Ch. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| Example: X Change                | <u>101.</u>          | nn Doe             |                                   |
|----------------------------------|----------------------|--------------------|-----------------------------------|
| X Remove                         | <u>V</u> <u>Mi</u>   | ke Jones           |                                   |
| X Add                            | <u>SV</u> <u>Sal</u> | lly Smith          |                                   |
| Type of Action<br>(Check One)    | <u>Title</u>         | <u>Name</u>        | <u>Addres</u> s                   |
| 1) Change                        | VT                   | LAUren ANNE Fuller | 2304 Forrest Cust<br>Lutz FL 3254 |
| $\frac{\searrow}{}$ $\wedge$ Add |                      |                    | LUTZ FL 3354                      |
| Remove                           |                      |                    |                                   |
| 2) Change                        |                      |                    |                                   |
| Add                              |                      |                    |                                   |
| Remove                           |                      |                    |                                   |
| 3) Change                        |                      |                    |                                   |
| Add                              |                      |                    |                                   |
| Remove                           |                      |                    |                                   |
| 4) Change                        |                      |                    |                                   |
| Add                              |                      |                    |                                   |
| Remove                           |                      |                    |                                   |
| 5) Change                        |                      |                    |                                   |
| Add                              |                      |                    |                                   |
| Remove                           |                      |                    |                                   |
| 6) Change                        |                      |                    |                                   |
| Add                              |                      |                    |                                   |
| Remove                           |                      |                    |                                   |

| If amending or adding additional Arti<br>Attach additional sheets, if necessary). | (Be specific)  |
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| provisions for implementing the ame   | nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| (if not applicable, indicate N/A)   |  |
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| The date of each amendment(s) adoption:  | _, if other tha |
|--|-----------------|
| Effective date if applicable:  |                 |
| (no more than 90 days after amendment file date)   |                 |
| <b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will indocument's effective date on the Department of State's records.               | not be listed a |
| Adoption of Amendment(s) (CHECK ONE)   |                 |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.   |                 |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): |                 |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  |                 |
| by"  (voting group)  |                 |
| (voting group)   |                 |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  |                 |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.   |                 |
| Dated 9-13-19  |                 |
| Dated 9-13-19 Signature Ibul Donald Fells  |                 |
| (By a director, president or other officer – if directors or officers have not been  | _               |
| selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)   |                 |
| Theodore Donald Fuller  (Typed or printed name of person signing)  |                 |
|  |                 |
| President  |                 |
| (Title of person signing)  |                 |