P10000043593

Office Use Only



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11/23/11--01013--022 **43.75



Jens Jens

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORA | ATION: <u>AT DIRECT TEL</u> | ECOM ACCESS CORP | |
|---------------------------|---|--|--|
| DOCUMENT NUMBI | ER: <u>P1000004359</u> | | |
| The enclosed Articles of | f Amendment and fee are su | ibmitted for filing. | |
| Please return all corresp | ondence concerning this ma | atter to the following: | |
| MARI | A SCHOENWETTER | | |
| | N | ame of Contact Person | |
| AT DI | RECT TELECOM ACCES | S, CORP Firm/ Company | |
| | | rimii/ Company | |
| 13580 | LUDLAM ROAD | Address | |
| | | Address | |
| PINEC | CREST FLORIDA 33150 | | |
| | C | ity/ State and Zip Code | |
| <u>mvsmi</u> : | nmi@hotmail.com E-mail address: (to be u | sed for future annual report | notification) |
| For further information | concerning this matter, plea | se call: | |
| MARIA SCHOENWET | | at (<u>786</u> | |
| Name of | Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for t | the following amount made | payable to the Florida Dep | artment 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) |
| Amen Divisi P.O. B | ng Address dment Section on of Corporations ox 6327 assee, FL 32314 | Amend Division Clifton 2661 E | Address Iment Section on of Corporations Building xecutive Center Circle assee, FL 32301 |



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 28, 2011

MARIA SCHOENWETTER 13580 LUDLAM ROAD PINECREST, FL 33156

SUBJECT: AT DIRECT TELECOM ACCESS CORP

Ref. Number: P10000043593

We have received your document for AT DIRECT TELECOM ACCESS CORP and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 311A00026595

Articles of Amendment to Articles of Incorporation of

| AT DIRECT TELECOM ACCESS. CORP | |
|--|--|
| (Name of Corporation as currently filed with | the Florida Dept. of State) |
| P10000043593 | |
| (Document Number of Corpora | tion (if known) |
| Pursuant to the provisions of section 607.1006, Florida State amendment(s) to its Articles of Incorporation: | utes, this Florida Profit Corporation adopts the following |
| A. If amending name, enter the new name of the corporation | <u>on:</u> |
| The new name must be distinguishable and contain the word "abbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional association" | Corp," "Inc," or "Co". A professional corporation |
| B. Enter new principal office address, if applicable: |) janu |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | |
| | |
| | |
| C. Feter and a street of the s | ASS. |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | N F |
| | 7 3 7 |
| | |
| | |
| | 1 |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad | |
| | 107 0351 |
| Name of New Registered Agent: | |
| | |
| (Flori | ida street address) |
| New Registered Office Address: | , Florida |
| | (City) (Zip Code) |
| | |
| | |
| New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam. | Agent: |
| т постоу иссері те арротитені аз гедізіегей идеті.— 1 ит јат. | mar with and accept the obligations of the position. |
| | |
| Signature of New Registe | ered Agent, if changing |

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)

Name

Address

1) PVST

ABNER SCHOENWETTER

13580 LUDLAM ROAD
PINECREST, FLORIDA 33156

| 2) | |
|----|--|
| 3) | |
| 4) | |
| 5) | |
| 6) | |

If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:

| Title(s) | Name | Title(s) | <u>Name</u> |
|--------------|------------------------|---------------|----------------------|
| 1) <u>P</u> | JEFFREY A SCHOENWETTER | 4) <u>S/T</u> | DEBRA A SCHOENWETTER |
| 2) <u>VP</u> | KAREN L SCHOENWETTER | 5) | |
| 3) <u>VP</u> | GERALD LOCKWOOD | 6) | |

| If amending or adding additional A attach additional sheets, if necessary |). (Be specific) | | | |
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| If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | |
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| · | | |
| ne date of each am | nendment(s) adoption: | |
| fective date <u>if app</u> | elicable: Olecament (s) adoption: December 1 20 1 (no more than 90 days after amendment file date) | |
| loption of Amend | ment(s) (CHECK ONE) | |
| |) was/were adopted by the shareholders. The number of votes cast for the amendment(s) ars was/were sufficient for approval. | |
| |) was/were approved by the shareholders through voting groups. The following statement by provided for each voting group entitled to vote separately on the amendment(s): | |
| "The numbe | of votes cast for the amendment(s) was/were sufficient for approval | |
| by | · · · · · · · · · · · · · · · · · · · | |
| 12. | (voling group) | |
| The amendment(s) action was not rei | was/were adopted by the board of directors without shareholder action and shareholder uired. | |
| The amendment(| was/were adopted by the incorporators without shareholder action and shareholder uired. | |
| Dat | ted NOVEMBER 21, 2011 | |
| Sig | enature M. SolvatA | |
| | (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) | |
| | DEBRA A SCHOENWETTER | |
| | (Typed or printed name of person signing) | |
| | SECRETARY/TREASURER | |
| | (Title of person signing) | |