# P12000099250

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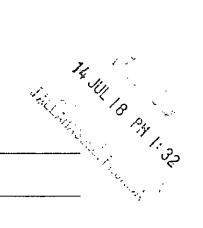
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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	ION: M-Net Inter	national, Inc.	
DOCUMENT NUMBER: P12000099250			
The enclosed Articles of A	mendment and fee are sul	omitted for filing.	
Please return all correspon	dence concerning this mat	ter to the following:	
So	cott Rosen, Esq	uire	
<del></del>	· · · · · · · · · · · · · · · · · · ·	Name of Contact Persor	l
So	cott Rosen, P.A	•	
		Firm/ Company	
15	0 S. Pine Island	d Road, Suite 4	17
		Address	
PI	antation, FL 33	3324	
		City/ State and Zip Code	<del>;</del>
srose	nlaw@bellsouth	n.net	
	_	ed for future annual report	notification)
For further information co	ncerning this matter, pleas	e call:	
Scott Rosen, Es	squire	at (954	915-0510
Name of C	ontact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	following amount made p	payable to the Florida Depa	rtment of State:
■ \$35 Fiting 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)
Mailing Address 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	

### Articles of Amendment Articles of Incorporation



#### M-Net International, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

<b>P</b> 1	20	<b>OO</b>	<b>N9</b>	92	250
		$\sim$		~~	

(Document Number of Corporation (if known)

lmént(s) to

f amending name, enter the new name of the	corporation:		
ne must be distinguishable and contain the wa hrp.," "Inc.," or Co.," or the designation "Con d "chartered," "professional association," or th	p," "Inc," or "Co". A proj		
Enter new principal office address, if applicab			
ncipal office address <u>MUST BE A STREET AL</u>	ODRESS )		
	<del></del>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>ox</u> )		
-			
If amending the registered agent and/or regist new registered agent and/or the new registere		a, enter the name	e of the
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida_	
	(City)		(Zip Code)
	(City)		(Zip Code)

Signature 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, 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 <math>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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Joshua A. Kesselman	3440 Hollywood Boulevard
Add			Suite 415
Remove			Hollywood, FL 33021
2) Change	VP	Joshua A. Kesselman	3440 Hollywood Boulevard
<b>✓</b> Add			Suite 415
Remove			Hollywood, FL 33021
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add		_	
Remove			
6) Change			
Add			
Remove			

<ul> <li>If amending or adding additional Arti (Attach additional sheets, if necessary).</li> </ul>	(Be specific)
	<u> </u>
<del></del> · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	HOWERCH HOST CONTAINED IN THE AMERICAN RECEIVE
<del> </del>	

The date of each amendment(s) adoption: June 11, 2014	, if other than the
date this document was signed.	
Effective date if applicable:	_ <del>_</del>
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast 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)	
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 July 17, 2014	
Signature	<del></del>
(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)	
Yishay Trif	
(Typed or printed name of person signing)	<del></del>
President	
(Title of person signing)	<del></del>