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TALLAHASSEE, FINALE

Amend

MAR 24 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: M-Net International	al, Inc.	
DOCUMENT NUME	P12000099250		·
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
•	Scott Rosen, Esq.		
		Name of Contact Perso	n
	Scott Rosen, PA		
		Firm/ Company	
	150 S. Pine Island Road, Ste.	300	
		Address	
	Plantation, FL 33324		
		City/ State and Zip Cod	e
	O 1		
sroser	@srosenlaw.com	16-6-	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Scott Rosen, Esq.		954 at (915-0510 (x301)
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Division Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

M-Net International, Inc.		
(Name of Co	orporation as currently filed with the Florida Dept. of State)	
P12000099250		
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	6, Florida Statutes, this Florida Profit Corporation adopts the fol	llowing amendment(s)
A. If amending name, enter the new name of	of the corporation:	
		The new
	the word "corporation," "company," or "incorporated" or "Corp," "Inc," or "Co". A professional corporation name "or the abbreviation "P.A."	the abbreviation
B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STRE</u>		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)	<u>e:</u> 7CE BOX)	MITHAR 22 AF
D. If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Florida, enter the name of the gistered office address:	STATE STATE
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, Florida,	
	(City)	(Zip Code)
New Registered Agent's Signature, if chang l hereby accept the appointment as registered	zing Registered Agent: agent. I am familiar with and accept the obligations of the post	ition.
	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 = Vicc 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: X Change	<u>PT</u>	John De	<u>oe</u>		
X Remove	<u>V</u>	Mike Jo	ones		
X Add	<u>sv</u>	Sally Si	<u>mith</u>		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change	VP		Avraham Fried		1369 45th Street
Add					Brooklyn, NY 11219
X Remove					
2) Change	VP	_	Raphael Golan	· 	3440 Hollywood Blvd., #415
X Add					Hollywood, FL 33021
Remove					
3) Change		_	-		
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change		_			
Add					
Remove					· · · · · · · · · · · · · · · · · · ·
6) Change		_			
Add					
Remove					

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	
•	
	
	'
-	
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
<u>provisions for implementing the amen</u> (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
N/A	
	· · · · · · · · · · · · · · · · · · ·

	March 1,6, 201,7	
he date of each amendment(s)	adoption:	, if other than th
ate this document was signed.		
M ffective date <u>if applicable</u> :	farch 16, 2017	
nective date in applicable.	(no more than 90 days after amendment file date)	
ote: If the date inserted in this	s block does not meet the applicable statutory filing requirements, this date value of State's records.	will not be listed as th
doption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder	
March 17	2,2017	
Signature	distribution of the Commission	
	director, president or other officer – if directors or officers have not been led, by an incorporator – if in the hands of a receiver, trustee, or other court	
	inted fiduciary by that fiduciary)	
	Yishay Trif	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	