P13000025580

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SOLOTEL	INC					
DOCUMENT NUMBER: P1300002558						
The enclosed Articles of Amendment and fee are su	bmitted for filing.					
Please return all correspondence concerning this ma	tter to the following:					
ELENA SOSNOV	/SKAYA					
	Name of Contact Person	n				
ES ACCOUNTING SERVICES INC						
	Firm/ Company					
18801 COLLINS	18801 COLLINS AVE, STE. 102-241					
Address						
HALLANDALE, FL 33009						
 	City/ State and Zip Cod	e				
LENOK69@HOTMA	IL.COM					
<u> </u>	sed for future annual report	notification)				
For further information concerning this matter, pleas	se call:					
ELENA SOSNOVSKAYA	at (954	, 699-5969				
Name 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 & 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	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301				

Articles of Amendment to Articles of Incorporation of

SOLOTELING	
(Name of Corporation as currently filed with the Florid	da Dept. of State)
P13000025580	
(Document Number of Corporation (if known	own)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	ida Profit Corporation adopts 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 "Co" word "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
-	
_	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
_	
	$\widetilde{\omega}$
D. If amending the registered agent and/or registered office address	in Florida enter the name of the
new registered agent and/or the new registered office address:	in Florida, enter the name of the
Name of New Registered Agent	
teme of their suggested significant	
(Florida street ac	ddress)
New Registered Office Address:	, Florida
(City)	(Zip Code)
Non-Destrict and Associated and Charles an	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with a	and accept the obligations of the position.
. , ,,	,G S Feerman
Signature of New Pagistawad Agen	t 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 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 Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	ALEKSANDR PRASIEVI	18801 COLLINS AVE, STE. 102-241
X Add			SUNNY ISLES, FL 33160
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
		_
If an amendment provides for an exch	ange, reclassification, or cancellatio	n of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	dment if not contained in the amen	unent us
provisions for implementing the amer	dment if not contained in the amen	uncut tist
provisions for implementing the amer	dment if not contained in the amen	onen use
provisions for implementing the amer	dment if not contained in the amen	oment tisk
provisions for implementing the amer	dment if not contained in the amen	United tisk
provisions for implementing the amer	dment if not contained in the amen	United tisk

The date of each amendment(s) at date this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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 ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated 09/27	7/2013	
Signature) (Clee)	
selector	rector, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	JACQUES JR BARIL	
	(Typed or printed name of person signing)	_
	PRESIDENT	
•	(Title of person signing)	