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2022 FEB - 2 AM II: 35
SECRETARY OF STATE

U- 7/10/2022

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: RAUTNET INC.		
	BER: P14000040003		
	s of Amendment and fee are st	abmitted for filing.	
Please return all corre	espondence concerning this ma	atter to the following:	
	SANJAY RAUT		
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Persor	 1
	RAUTNET INC.		
		Firm/ Company	·
	2619 SALT LAKE DRIVE		
		Address	
	JACKSONVILLE, FL 32211	I	
	-	City/ State and Zip Code	:
	SANJAYRAUT@GMAIL.C	ЮM	
		sed for future annual report	notification)
For further information	on concerning this matter, plea	904	785 3929
Name of Contact Person		at (at Coc	_) le & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	rtment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

to

RAUTNET INC.		0000	
(Name of Corporation as c	currently filed with the Flo	rida Dept. (15 tats) -	2 AM II: 35
P14000040003		SECRETA	NY DE STATE
(Document No	umber of Corporation (if kn	own) TALEAH	ASSEE, FL
Pursuant to the provisions of section 607.1006, Florida Statutits Articles of Incorporation:	tes, this <i>Florida Profit Corp</i>	poration adopts the foll	owing amendment(s
A. If amending name, enter the new name of the corpora	tion:		
CSVNET INC.			The new
name must be distinguishable and contain the word "corporate "Inc.," or Co.," or the designation "Corp," "Inc," or " "chartered," "professional association," or the abbreviation	Co". A professional corp	rporated" or the abbre poration name must c	viation "Corp.," ontain the word
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS	[)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered off		er the name of the	
new registered agent and/or the new registered office	address:		
Name of New Registered Agent			
(FI	lorida street address)		
New Registered Office Address:		, Florida	
New Might Country of the Might	(City)	. 1 107.144	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	d Agent: amiliar with and accept the	obligations of the posit	tion.
r nevery accept the approximent as registered agent. I am je	man and accept the	manganiman igram yanan	
Signature o	f New Registered Agent, if c	changing	
Check if applicable			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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 = Trustce; 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 Doc 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	$\underline{\mathbf{V}}$	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			_
Add			
Remove			
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Damoura			-

	ditional sheets, if nec	onal Articles, enter :essary). (Be speci	fic)		
		-			· · · · · · · · · · · · · · · · · · ·
				-	
					_
_					
<u>i an amer</u>	<u>idment provides foi</u>	r an exchange, recla	issification, or can	cellation of issued s te amendment itself	<u>hares,</u>
(if no	t applicable, indicate	r N/A)	iot Contained in th	ic amendment usen	•
					

.

The date of each amendment(s) a date this document was signed.	doption:	if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file d	
	(no more than 90 aays after amenament file a	are)
Note: If the date inserted in this I document's effective date on the D	block does not meet the applicable statutory filing requirent epartment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the afficient for approval.	amendment(s)
•	proved by the shareholders through voting groups. The followed each voting group entitled to vote separately on the amend.	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	<u></u>	
	(voting group)	
DatedO	128/2022 agay Daw	
(By a d selecte	irector, president or other officer – if directors or officers had, by an incorporator – if in the hands of a receiver, trustee, ted fiduciary by that fiduciary)	
	SANJAY RAUT	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	