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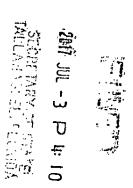
| (| Requestor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
| (| Business Entity Name) | |
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| Certified Copies | Certificates of S | Status |
| Special Instructions | to Filing Officer: | |
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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Broadsmart Global, Inc. **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Danilo Cruz Name of Contact Person MagicJack LP Firm/ Company PO Box 6785 Address West Palm Beach, FL 33405 City/ State and Zip Code Danilo.Cruz@magicjack.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Danilo Cruz Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made gayable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment Articles of Incorporation of Broadsmart Global, Inc. (Name of Corporation as currently filed with the Florida Dept. (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A. 500 Village Blvd., Suite 120 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) est Palm Beach, FL 33409 C. Enter new mailing address, if applicable: PO Box 6785 (Mailing address MAY BE A POST OFFICE BOX) West Palm Beach, FL 33405 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: Name of New Registered Agent (Florida street address) N/A New Registered Office Address: Florida (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. 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 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 | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | CFO | Jose Gordo | 222 Lakeview Avenue |
| Add | | | Suite 1600 |
| X Remove | | | West Palm Beach, FL 33401 |
| 2) Change | CFO | Thomas Fuller | 560 Village Blvd. |
| X Add | | | Suite 120 |
| Remove | | | West Palm Beach, FL 33409 |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| If amending or adding additional Arti (Attach additional sheets, if necessary). | (Be specific) | |
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| If an amandment provides for an eval | nange, reclassification, or cancellation of issued shares, | |
| provisions for implementing the ame | ndment if not contained in the amendment itself: | |
| (if not applicable, indicate N/A) | | |
| A | | |
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| The date of each amendment | | , if other than the |
|--|---|----------------------------------|
| date this document was signed. | May 8, 2017 | |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) | |
| | this block does not meet the applicable statutory filing requirements, this de Department of State's records. | s date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/wer by the shareholders was/we | e adopted by the shareholders. The number of votes cast for the amendment sufficient for approval. | ent(s) |
| | e approved by the shareholders through voting groups. The following stat d for each voting group entitled to vote separately on the amendment(s): | ement |
| | cast for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| The amendment(s) was/wer action was not required. | e adopted by the board of directors without shareholder action and shareholder | older |
| ☐ The amendment(s) was/wer action was not required. | e adopted by the incorporators without shareholder action and shareholder | • |
| Signature | ne 29, 2017 | |
| | y a director, president or other officer - if directors or officers have not be | |
| | lected, by an incorporator – if in the hands of a receiver, trustee, or other of pointed fiduciary by that fiduciary) | ourt |
| | Thomas Fuller (Typed or printed name of person signing) | |
| | CF0 | |
| | (Title of person signing) | |