P17000100014

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



300355800073

02/08/21--01014--003 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: Stonegate Telecom | Inc | |
|---------------------------|--|--|--|
| DOCUMENT NUMBI | | | |
| The enclosed Articles of | f.Amendment and fee are sub | omitted for filing. | |
| Please return all corresp | ondence concerning this mat | ter to the following: | |
| J | essica DeChristopher | | |
| - | | Name of Contact Person | |
| 9 | Stonegate Telecom Inc | | |
| - | | Firm/ Company | |
| ć | 224 D. 1 | гиил Сонфану | |
| <u> </u> | 306 Banyan Blvd | | |
| | | Address | |
| (| Orlando, FL 32819 | | |
| - | · - | City/ State and Zip Code | |
| i | essica@ksjcom.com | | |
| - | = = | ed for future annual report | notification) |
| | • | • | , |
| For further information | concerning this matter, pleas | e call: | |
| Jessica DeChristopher | | at (| 274-6246 |
| Name o | f Contact Person | Area Coo | le & Daytime Telephone Number |
| Enclosed is a check for | the following amount made p | payable to the Florida Depa | ritment of State: |
| S35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Ame Divis P.O. | ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314 | Amend Divisio The Ce 2415 N | Address ment Section n of Corporations entre of Tallahassee 4. Monroe Street, Suite 810 ssee, FL 32303 |

Articles of Amendment Articles of Incorporation

FILED

of

| Stonegate Telecom Inc | <u> </u> | 2021 FEB -8 AFI 4: 43 |
|--|--|---|
| (<u>Name c</u> | of Corporation as currently | filed with the Florida Dept of State ATE |
| P17000100014 | | MELMHMJJEC, FL |
| | (Document Number of | Corporation (if known) |
| Pursuant to the provisions of section 607, its Articles of Incorporation: | 1006, Florida Statutes, this F | Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new n | ame of the corporation: | |
| | | The new |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association," | Corp." "Inc." or "Co". A | ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word |
| D. Cutar was asiminal office address. | if applicable: | 8306 Banyan Blvd |
| B. Enter new principal office address, (Principal office address MUST BE A S | | Orlando, FL 32819 |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | 8306 Banyan Blvd |
| | | Orlando, FL 32819 |
| | | |
| D. If amending the registered agent ar | | |
| new registered agent and/or the ne | | |
| Name of New Registered Agent | Jessica DeChristopher | |
| | 8306 Banyar | Blud |
| | (Florida stre | ret address) |
| New Registered Office Address: | 8306 Banyan Blvd, Orlando | Florida 32819 |
| THE REGISTER OFFICE TRIBLESS. | - | (City) (Zip Code) |
| | | |
| New Registered Agent's Signature, if thereby accept the appointment as regis | t <mark>cred agent. I am familiar w</mark> Cared agent. I am familiar w | vith and accept the obligations of the position. |
| | They | mll |
| | Signature of New Re | egistered Agent, if changing |
| | | |

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), 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 = 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: XChange | <u>PT</u> | John Doe | |
|-------------------------------|--------------|-----------------------|--------------------|
| X Remove | <u>v</u> | Mike Jopes | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| 1) Change | P | Elizabeth Grant | 4 Stone Gate S |
| Add | | | Longwood, FL 32779 |
| XRemove | | | |
| 2) Change | P | Jessica DeChristopher | 8306 Banyan Blvd |
| X Add | | | Orlando, FL 32819 |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | _ | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| If amending or adding additional A (Attach additional sheets, if necessary | rticles, enter change(s) here: One of the specific in the spe | | |
|--|--|----------------------------|---------------------------------------|
| A | y. (in spraying | | |
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| If an amendment provides for an e | xchange, reclassification, or canc | ellation of issued shares, | |
| provisions for implementing the a (if not applicable, indicate N/A | mendment it not contained in the | s amenament usen: | |
| liA | | | |
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| The date of each amendmen | | , if other than the |
|--|---|---------------------------|
| date this document was signed | l. - 01/28/2021 | |
| 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 date he Department of State's records. | will not be listed as the |
| adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/we action was not required. | re adopted by the incorporators, or board of directors without shareholder action | and shareholder |
| | re adopted by the shareholders. The number of votes east for the amendment(s) ere sufficient for approval. | |
| | re approved by the shareholders through voting groups. The following statemented for each voting group entitled to vote separately on the amendment(s): | t |
| "The number of vote | s cast for the amendment(s) was/were sufficient for approval | |
| by | | |
| | (voting group) | |
| 01/28 | /2021 | |
| Dated | | |
| Signature _ | X10000 26 | |
| signature (F | By a director, president or other officer – if directors or officers have not been | |
| | elected, by an incorporator - if in the hands of a receiver, trustee, or other court | |
| a | ppointed fiduciary by that fiduciary) | |
| | Janet DeChristopher | |
| | (Typed or printed name of person signing) | |
| | Chief Operations Officer | |
| | (Title of person signing) | |