Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210003085783)))



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To:		2021 AUS 1
	Division of Corporations	CO
	Fax Number : (850)617-6380	
From:		2
•,	Account Name : ICONNECT SOLUTIONS CORP	PH 12: 59
	Account Number : I20190000122 .	<u>ئ</u>
	Phone : (407)863-0096	ď
	Fax Number : (407)612-2181	4

COR AMND/RESTATE/CORRECT OR O/D RESIGN KIDZ PLAY & PARTY CORP

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COVER LETTER

TO: Amendment Section Division of Corporations	H21000308578 3
NAME OF CORPORATION: KIDZ I	PLAY & PARTY CORP
DOCUMENT NUMBER: P180000138	309
The enclosed Articles of Amendment an	nd fee are submitted for filing.
Please return all correspondence concern	ning this matter to the following:
EMERSON COR	REA
	Name of Contact Person
ICONNECT SOL	UTIONS CORP
	Firm/ Company
6735 CONROY I	ROAD STE 309
	Address
ORLANDO, FL	32835
	City/ State and Zip Code
CONTACT@IC	ONNECTSC.COM
E-mail addr	ess: (to be used for future annual report notification)
For further information concerning this	matter, please cuil:
EMERSON CORREA	at (407 863 0096
Name of Contact Person	Area Code & Daytime Telephone Number

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

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Articles of Amendment to Articles of Incorporation of

KIDZ PŁAY & PARTY CORP		
(Name o	f Corporation as currently filed with the	(he Florida Dept. of State)
P18000013809		
	(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>Florida Profi</i>	it Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:	
		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contain "Inc.," or Co.," or the designation "Contained association," B. Enter new principal office address, (Principal office address MUST BE A Sociation of the Authority of the Authority of the Contained address of the Authority of	Corp." "Inc." or "Co". A professional or the abbreviation "P.A." if applicable: TREET ADDRESS)	r "incorporated" or the abbreviation "Corp.," all corporation name must contain the word
D. If amending the registered agent ar new registered agent and/or the ne-	nd/or registered office address in Floric w registered office address: MARIA FERNANDA RIBEIRO DA S	
Name of New Registered Agent		
	1919 HAILSHAM CT (Florida street address)	
	ORLANDO	32824
New Registered Office Address:	(City)	, Florida(Zip Code)
New Registered Agent's Signature, if I hereby accept the appointment as registered. Check if applicable The amendment(s) is/are being filed p	Signature of New Ref Stored A	

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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: John Doe X Change <u>PT</u> \underline{V} Mike Jones X Remove SVSally Smith <u>X</u> Add Address Type of Action Title <u>Name</u> (Check One) 11505 SATELLITE BLVD SUITE 3 AMANDA REGINA DE L SIMOES 1) ____ Change ORLANDO, FL 32837 ___ Add Remove MARIA FERNANDA R. DA SILVA 1919 HAILSHAM CT 2) ____ Change ORLANDO, FL 32824 Add Remove 3) ____ Change ___ Add __ Remove 4) ____ Change ____ Add ____ Remove 51 ____ Change ___ Add Remove 6) ____ Change ____ Add ____ Remove

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	H21000308578 3
CHANGING REGISTERED AGENT	
REMOVING AMANDA REGINA DE LIMA SIMOES	
ADDING MARIA FERNANDA RIBEIRO DA SILVA AS PRESIDENT	
F. If an amendment provides for an exchange, reclassification, or can	icellation of issued shares.
provisions for implementing the amendment if not contained in t (if not applicable, indicate N/A)	he amendment itself:
	<u> </u>

To: 18506176383

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2021-08-16 22:06 59 GMT

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From: EMERSON CORREA

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The date of each amendment(s) adoption:, if other than the date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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
bv"
by
AUGUST 16、2021
Dated
ai. D
Signature X (By a director, president or other officer – if directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)
AMANDA REGINA DE LIMA SIMOES
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)