## P180000 83476

| (Requestor's Name)                      |              |
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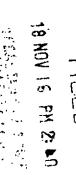
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORA  | TION: MOBILE ADVER                          | TISING CONSULTING I  | NC.  |  |  |  |
|--|---|--|--|--|--|--|
| DOCUMENT NUMBE   |   |  |  |  |  |  |
|  | Amendment and fee are su                    | bmitted for filing.  |  |  |  |  |
| Please return all correspo   | ondence concerning this ma                  | tter to the following:   |  |  |  |  |
| Ве   | eatrice Bianchi Fasani                      |  |  |  |  |  |
|  |   | Name of Contact Perso  | n  |  |  |  |
| M  | OBILE ADVERTISING C                         | ONSULTING, INC.  |  |  |  |  |
|  | · · · · · · · · · · · · · · · · · · ·       | Firm/ Company  |  |  |  |  |
| 42   | 0 LINCON ROAD, SUITE                        | E 357  |  |  |  |  |
|  |   | Address  |  |  |  |  |
| М  | IAMI BEACH, FL 33139                        |  |  |  |  |  |
| _  | City/ State and Zip Code                    |  |  |  |  |  |
| BBIANG   | CHI@BFFLEGAL.COM                            |  | ,  |  |  |  |
|  | E-mail address: (to be us                   | sed for future annual report                                       | notification)  |  |  |  |
| For further information c  | oncerning this matter, pleas                | se call:   |  |  |  |  |
|  |   |  |  |  |  |  |
| BEATRICE BIANCHI F   |   | at (   | _) <del></del>   |  |  |  |
| Name of 0  | Contact Person                              | Area Co  | de & Daytime Telephone Number  |  |  |  |
| Enclosed is a check for th   | ne following amount made                    | payable to the Florida Depa  | artment of State:  |  |  |  |
| ■ \$35 Filing Fee  | □\$43.75 Filing Fee & Certificate of Status | □\$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<br>Divisio<br>Clifton  | Address Iment Section on of Corporations Building Executive Center Circle              |  |  |  |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

MOBILE ADVERTISING CONSULTING, INC.

| (Name of Corporation as curren   | athy filed with the Flouide Den | - of State)                 |           |
|--|---------------------------------|-----------------------------|-----------|
| P18000083476   | nty med with the Florida Dep    | t. or state)                |           |
| (Document Number   | of Corporation (if known)       |                             |           |
| Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:   | is Florida Profit Corporation a | dopts the following amendme | ent(s) to |
| A. If amending name, enter the new name of the corporation:  |                                 |                             |           |
|  |                                 | The new                     |           |
| name must be distinguishable and contain the word "corporat<br>"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or<br>word "chartered," "professional association," or the abbreviation | "Co". A professional corpore    |                             |           |
| B. Enter new principal office address, if applicable:  | N/A                             |                             |           |
| (Principal office address MUST BE A STREET ADDRESS)  |                                 | Ent Co                      |           |
|  |                                 | 24 8                        | 71        |
|  |                                 | 10% on                      |           |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  | N/A                             |                             |           |
|  |                                 | 7.7.                        |           |
|  | <del></del>                     | <del> </del>                |           |
|  | -                               |                             |           |
| D. If amending the registered agent and/or registered office ad<br>new registered agent and/or the new registered office addre   |                                 | ne of the                   |           |
| Name of New Registered Agent   |                                 |                             |           |
| Same of the Registered Figure  |                                 | <del></del>                 |           |
| (Florida s   | treet address)                  | ·                           |           |
| New Registered Office Address: N/A   |                                 | . Florida                   |           |
|  | (City)                          | (Zip Code)                  |           |
|  |                                 |                             |           |
| New Registered Agent's Signature, if changing Registered Ager  |                                 |                             |           |
| I hereby accept the appointment as registered agent. I am familian   | with and accept the obligation. | s of the position.          |           |
|  |                                 |                             |           |
|  | Desire and Assert Assert        |                             |           |
| 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.

| X Change                   | <u>PT</u> <u>Jo</u> | hn Doe                  |                       |  |  |
|----------------------------|---------------------|-------------------------|-----------------------|--|--|
| X Remove                   | <u>V</u> <u>M</u>   | Mike Jones              |                       |  |  |
| X Add                      | <u>SV</u> <u>Sa</u> | Sally Smith             |                       |  |  |
| Type of Action (Check One) | <u>Title</u>        | Name                    | <u>Addres</u> s       |  |  |
| 1) Change                  | D                   | DARON GIRIMONTI         | 420 LINCOLN ROAD      |  |  |
| Add                        |                     |                         | SUITE 357             |  |  |
| X Remove                   |                     |                         | MIAMI BEACH, FL 33139 |  |  |
| 2) Change                  | <u>S</u>            | BEATRICE BIANCHI FASANI | 420 LINCOLN ROAD      |  |  |
| Add                        |                     |                         | SUITE 357             |  |  |
| X Remove                   |                     |                         | MIAMI BEACH, FL 33139 |  |  |
| 3) Change                  | PD                  | MAC2 HOLDINGS, INC.     | 420 LINCOLN ROAD      |  |  |
| X Add                      |                     |                         | SUITE 357             |  |  |
| Remove                     |                     |                         | MIAMI BEACH, FL 33139 |  |  |
| 4) Change                  |                     |                         |                       |  |  |
| Add                        |                     |                         |                       |  |  |
| Remove                     |                     |                         |                       |  |  |
| 5) Change                  |                     |                         |                       |  |  |
| Add                        |                     |                         |                       |  |  |
| Remove                     |                     |                         |                       |  |  |
| 6) Change                  |                     |                         |                       |  |  |
| Add                        |                     |                         |                       |  |  |
| Remove                     |                     |                         |                       |  |  |

| (Attach  | g or adding additional Articles, enter change(s) here: tional sheets, if necessary). (Be specific) |         |
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| If an ai | ment provides for an exchange, reclassification, or cancellation of issued shares,                 |         |
| provis   | for implementing the amendment if not contained in the amendment itself:                           |         |
| (ij      | applicable, indicate N/A)  |         |
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|  | NOVE                  | MBER 8, 2018        |                              |   |
|--|-----------------------|---------------------|------------------------------|---|
| The date of each amendment(  | s) adoption:          |                     |                              | , if other than the                       |
| date this document was signed.                                     |                       |                     |                              |   |
| Effective date if applicable:                                      | NOVEMBER 8, 2013      | 8                   |                              |   |
| Effective date <u>it applicable</u> .                              | (ne                   | o more than 90 day  | vs after amendment file da   | nte)                                      |
| Note: If the date inserted in the document's effective date on the |                       |                     | statutory filing requirement | ents, this date will not be listed as the |
| Adoption of Amendment(s)   | (CHECH                | K ONE)              |                              |   |
| The amendment(s) was/were by the shareholders was/wer              |                       |                     | iber of votes cast for the a | mendment(s)                               |
| ☐ The amendment(s) was/were must be separately provided            |                       |                     |                              |   |
| "The number of votes   | cast for the amendme  | ent(s) was/were suf | ficient for approval         |   |
| by   | (voting g             |                     |                              |   |
| , <u> </u>   | (voting s             | group)              | <del></del> .                |   |
| ☐ The amendment(s) was/were action was not required.               |                       |                     |                              | i shareholder                             |
| ☐ The amendment(s) was/were action was not required.               | adopted by the incor  | rporators without s | hareholder action and sha    | reholder                                  |
| DatedSignature   | MBER 8, 2018          | 0                   |                              |   |
|  |                       |                     | if directors or officers hav |   |
|  |                       |                     | ds of a receiver, trustee, o | r other court                             |
| арр  | ointed fiduciary by t | that fiduciary)     |                              |   |
|  | Beatrice Bianchi      | i Fasani            |                              |   |
|  | (Турс                 | ed or printed name  | of person signing)           |   |
|  | Officer               | S                   |                              |   |
|  |                       | (Title of per       | rson signing)                |   |