## P19000003473

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(Ad	dress)	
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2019 JAN 28 PM 6: 1

C. GOLDEN FEB - 4 2019

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	Social Plug Inc.		
DOCUMENT NUM	P19000003473 BER:		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Daniel Pessin		
		Name of Contact Per	rson
	Social Plug Inc.		
	110 E. Broward Blvd	Firm/ Company	
	Fort Lauderdale, FL, 33301	Address	
		City/ State and Zip C	ode
djpes	ssy11@gmail.com		
	E-mail address: (to be u	sed for future annual rep	ort notification)
For further informatio	on concerning this matter, pleas	se call:	
Daniel Pessin		954 at (	257-6347
Name	of Contact Person	Area	Code & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida D	epartment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Ame Divi Clift	eet Address endment Section ision of Corporations ion Building 1 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

Social Plug Inc.			2019 JAN 28 PM 6: 17
(Name o	of Corporation as currently	filed with the Florida Dept. of	State)
P19000003473			C LANGUAGE STATE
	(Document Number of C	Corporation (if known)	- INCLMINGSCELFE
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	<i>lorida Profit Corporation</i> adopt	s the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	o". A professional corporation	ed" or the abbreviation
B. Enter new principal office address, (Principal office address MUST BE A S	<u>if applicable:</u> TREET ADDRESS )		
			<u> </u>
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			
D. If amending the registered agent ar new registered agent and/or the ne	nd/or registered office address	ss in Florida, enter the name o	of the
	Daniel Pessin		
Name of New Registered Agent	2119 se 10th avenue		<del> </del>
			·
	(Florida stree	et address)	33316
New Registered Office Address:			orida
	(1	City)	(Zip Code)
Nam Busistaned Agently Signature if a	honging Degistered Agents		
New Registered Agent's Signature, if c I hereby accept the appointment as regis	tered agent. I am familiar w	ith and accept the obligations of	the position.
0	( F		
	Signature of New Re	gistered 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Cindy Pessin	110 E. Broward Blvd
Add			Fort Lauderdale, FL, 33301
X Remove			
2) Change	P	Daniel Pessin	110 E. Broward Blvd
X Add			Fort Lauderdale, FL, 33301
Remove			
3) Change			
Add			
Remove			
4) Change	<del>1 </del>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Article (Attach additional sheets, if necessary).	(Be specific)	
		_,
		<del></del> .
		. <del>.</del>
If an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
<del></del>		
		<del></del>
		· · · · · · · · · · · · · · · · · · ·
	<del></del>	<del></del>

The date of each amendment(s)	adoption:	, if other than th
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this document's effective date on the $\Gamma$	block does not meet the applicable statutory filing requirements, this date with epartment of State's records.	ll not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were apmust be separately provided for	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	it for the amendment(s) was/were sufficient for approval	
by	(voting group)	
·	(voting group)	
The amendment(s) was/were ac action was not required.	lopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
01/25/20	9	
Dated		
Signature	h Ressi	
(By a select	director, president or other officer - if directors or officers have not been ed, by an incorporator - if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	<del></del>
	Cindy Pessin	
	(Typed or printed name of person signing)	<del></del>
	President	
	(Title of person signing)	