## P2000000 8902

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R. WHITE

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: ATT SMART CO	NNECT INTERNATIONA	L CORP.
DOCUMENT NUM	DOMENTORONO		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Jessica Tenaglia		
		Name of Contact Person	1
		Firm/ Company	
	100 N Federal Hwy Unit 102	5 Fort Lauderdale	
		Address	
	Florida 33301		
		City/ State and Zip Code	e
	j_tenaglia@hotmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
		at (	)de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
<b>■</b> \$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)
	iling Address		Address
Amendment Section		Amendment Section	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to

## Articles of Incorporation of

ATT SMART CONNECT INTERNATION ALL GORP. 10 PH 5: 01

(Name of Corporat	ion as currently filed with the Florida Dept. of State)
P20000008902	
(Docum	ment Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florid its Articles of Incorporation:	la Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the c	corporation:
AT&T SMART CONNECT INTERNATIONAL CO	ORP. The new
name must be distinguishable and contain the word "c "lnc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbr	corporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word eviation "P.A."
B. Enter new principal office address, if applicable	
(Principal office address <u>MUST BE A STREET AD</u>	DRESS )
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u></u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered	ered office address in Florida, enter the name of the
Name of New Registered Agent	<del></del>
	(Florida street address)
	(rioriaa street adaress)
New Registered Office Address:	, Florida
	(Cny) (Exp Code)
New Registered Agent's Signature, if changing Re	gistered Agent:
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
Sier	nature of New Registered Agent, if changing

Check if applicable

<sup>☐</sup> 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u> </u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove Change		/	<u></u>
Add			
Remove			
4) Change			
Add			
Remove			<del></del>
5) Change		- /	
Add	, "		
Remove	e.		
6) Change			
Add			
Remove			

lach <i>additional sh</i>	ets, if necessary). (Be specific)		
			/
		<del></del>	<del></del>
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	<u>/</u>	<del></del>	
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	<del></del>		
n amenament pr	ovides for an exchange, reclassific ementing the amendment if not co	ation, or cancellation of issi	ued snares, itself
(if not applicab	e, indicate N/A)	manica in the unicidinent	H.SCH.

•

	02/05/2020
The date of each amendment(s) a	adoption:, if other than the
date this document was signed.	
	05/2020
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed as the department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were action was not required.	lopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	oproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	·"
	(voting group)
02/05/202 Dated Signature	Maul.
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 inted fiduciary by that fiduciary)
	Jessica Tenaglia
	(Typed or printed name of person signing)
	President
	(Title of person signing)