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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Azure Data Conference	ences, Inc.				
DOCUMENT NUMI	BER: P22000052657		<del></del>			
The enclosed Articles	of Amendment and fee are sub	omitted for filing.				
Please return all corre	spondence concerning this mat	ter to the following:				
	Jeffrey T. Beatty					
	Name of Contact Person					
	Law Offices of Jeffrey T. Beatty, LLC					
		Firm/ Company				
	20 Water Street					
		Address				
	Guilford, CT 06437					
		City/ State and Zip Coo	de			
	shirley.brothers@gmail.com					
	E-mail address: (to be us	ed for future annual repor	t notification)			
For further informatio	n concerning this matter, pleas	e call:				
Jeffrey T. Beatty		at ( <sup>203</sup>	<sup>453-4399</sup>			
Name (	of Contact Person	Area Co	ode & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made p	payable to the Florida Dep	partment 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		Street Address 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

(Name of Corporat	tion as currently filed with the Florida	Dept. of State)
222000052657		
(Docu	ment Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floric s Articles of Incorporation:	da Statutes, this Florida Profit Corporat	ion adopts the following amendment(s
s. If amending name, enter the new name of the c	corporatio <u>n:</u>	
abCon Community, Inc.		The new
ame must be distinguishable and contain the word "e "Inc.," or Co.," or the designation "Corp." "Inc, 'chartered," "professional association," or the abbr	," or "Co". A professional corporat	ated" or the abbreviation "Corp.,"
3. Enter new principal office address, if applicable		
Principal office address <u>MUST BE A STREET AD</u>	DRESS )	
	<del>-</del>	
	<del></del>	
E. Enter new mailing address, if applicable:	av.	
(Mailing address MAY BE A POST OFFICE BE	<u></u> _	
		<u> </u>
). If amending the registered agent and/or registe	ered office address in Florida, enter th	e name of the
new registered agent and/or the new registered		
Name of New Registered Agent		
<del></del>	(Florida street address)	<del></del>
New Registered Office Address:		, Florida_
	(City)	(Zip Code)
Sew Registered Agent's Signature, if changing Re	gistered Agent:	
hereby accent the appointment as registered agent	I am familiar with and accept the oblig	vations of the position.
nereny accept the appointment as registered agent.		
neren, accept the apprinanent as registerea agent.		
neren, accept the apprinanent as registerea agent.		

☐ 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: 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>	Address
1) Change			
Add			
Remove			
2) Change			_
Add			
Remove 3) Change			
Add		<del>-</del>	
Remove			
4) Change			
Add			
Remove			
5) Change			<del></del>
Add			
Remove			
6) Change			
Add			<del> </del>
Romano			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	<u> </u>
	<u> </u>
· · · · · · · · · · · · · · · · · · ·	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	endment it not contained in the amendment usen.
· · · · · · · · · · · · · · · · · · ·	

The date of eac	th amendment(s) adoption twas signed.	on: 10 (	18/2024	···	, if other than the
Effective date <u>i</u>	f applicable:	the more t	han 90 davs after ame	m Jan ma GI - Janan	
•		(no more ti	nan 90 aays ajter ame	rnameni jue aate)	
	te inserted in this block ctive date on the Departi			iling requirements, this c	late will not be listed as the
Adoption of Ar	mendment(s)	(CHECK ONE)	)		
The amendm	ent(s) was/were adopted of required.	by the incorporator	rs, or board of director	rs without shareholder ac	tion and shareholder
	ent(s) was/were adopted holders was/were sufficie		s. The number of vote	es east for the amendmen	u(s)
	ent(s) was/were approve arately provided for each			ups. The following states on the amendment(s):	nent
"The n	umber of votes cast for the	ne amendment(s) wa	as/were sufficient for	approval	
by				**	
, —		(voting group)			
	10/08/2024 Dated				
	Signature	Shirles	Brothers	L	
	selected, by		f in the hands of a rece	or officers have not been eiver, trustee, or other cou	
	Shir	ley Brothers			
	_	(Typed or pr	inted name of person	signing)	
	Pres	ident			
		(Title of pers	son signing)	<del> </del>	