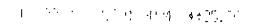
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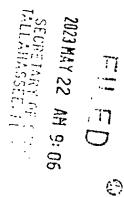
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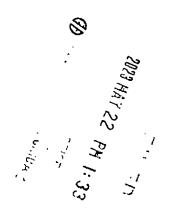
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## COVER LETTER

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**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: JG Connection Enternise Inc			
DOCUMENT NUMBER: PROCESS 1548			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Name of Contact Person  Section Contact Person  Firm/ Company  Address  City/ State and Zip Code  Femail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Contact Person at (154) 318 51613  Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:			
S35 Filing Fee  Certificate of Status  Certificate of Status  Certificate of Status  (Additional copy is enclosed)  S52.50 Filing Fee  Certificate of Status  Certified Copy  (Additional Copy is enclosed)			
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment to

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2023 MAY 22	-0	ν.
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	Articles of Incorpor of	ration	2023 MAY :	- U 22 AM 9:06	
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(Name of Corporatio			Florida/Dept.	pfiState)	
P22010064548			.00	4.77	
(Docum	ent Number of Corp	oration (i	f known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florid	la Profit (	Corporation add	opts the followin	g amendment(s) to
A. If amending name, enter the new name of the co	rporation:				
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	or "Co". A proj	iny," or " Tessional	incorporated" c corporation na	or the abbreviation ime must contain	_The new on "Corp.," n the word
B. Enter new principal office address, if applicable:	<u>:</u>				
(Principal office address MUST BE A STREET ADD					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>x</u> )				
D. If amending the registered agent and/or register new registered agent and/or the new registered of		n Florida.	enter the nan	ne of the	
Name of New Registered Agent				<u>-</u>	_
					<del>.</del>
	(Florida street ad	dress)			
New Registered Office Address:			_ <u></u> ,	, Florida	
	(City)			(Zip (	Sode)
	(Florida street ad (City) istered Agent: I am familiar with a	·	the obligations	(Zip (	
C:	ature of New Registe	read to an	if obanaina		-
Signa	nure oj wew Kegiste	теа Адеп	, ij cnanging		

Check if applicable

☐ 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)

\_\_ Add

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	$\underline{PT}$	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	<u>Ď</u>	2000 C.C. (K)	Mag Vestal Dive
Add			Marical Dave Coral Springs, Fl
Remove			33011
2) Change	-		<del></del>
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<del></del>
Remove			
6) Change	_		

If amending a	or adding additional Articles, en	iter change(s) here:		
(Attach addition	onal sheets, if necessary). (Be sp	necific)		
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If an amenda	nent provides for an exchange, r or implementing the amendmen	reclassification, or co	ancellation of issued sha	ares,
(if not ap	pplicable, indicate N/A)	t ii noi containeu iii	the amendment usen.	
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The date of each amendment(s) addate this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file da	<del></del>
	(no more than 90 days after amendment file da	ite)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirem partment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shar	eholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the afficient for approval.	amendment(s)
	proved by the shareholders through voting groups. The followeach voting group entitled to vote separately on the amenda	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
Dated_ 5/.2	2/20.22	
Dated 1/3	2/1/1/2	
Signature CC	in think Day	
(By a d	irector, president or other officer - if directors or officers ha	ve not been
	d, by an incorporator - if in the hands of a receiver, trustee, of	or other court
appoint	ted fiduciary by that fiduciary)	
	-Toos acdos	
	(Typed or printed name of person signing)	
	NO.	
	(Title of person signing)	

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