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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PAY CALL COR	RP
DOCUMENT NUMBER: P24000052572	
The enclosed Articles of Amendment and fee are so	submitted for filing.
Please return all correspondence concerning this ma	natter to the following:
EYAL SHARON, ESQ.	
	Name of Contact Person
SHARON LAW, PLLC	
	Firm/ Company
3823 SW 49TH PL.	
, ,, _	Acdress
FORT LAUDERDALE, FL	. 33312
-	City/ State and Zip Code
EYAL@SHARONLAWPI.I	LC.COM
E-mail address: (to be u	used for future annual report notification)
For further information concerning this matter, plea	ase call:
EYAL SHARON, ESQ.	at (954) 599-2331
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Malling 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

PAY CALL CORP				
(<u>Name</u> P24000052572	of Corporation as currently	filed with the Florida	Dept. of State)	
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Fiorida Statutes, this F	Torida Profit Corporat	ion adopts the following	g amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
PAY CALL CORP.				The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Chartered," "professional association,	Corp." "Inc." or "Co". A	ompany," or "incorpora professional corporat	ated" or the abbreviatio ion name must contain	л "Сого"
B. Enter new principal office address, (Principal office address MUST BE A S	<u>if applicable:</u> TREET ADDRESS)			
C. Enter new mailing address, if apple (Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new	OFFICE BOX) id/or registered office uddre	ss in Florida, enter th	e name of the	SECRETARY OF S TALLAHASSEE.
Name of New Registered Agent	SHARON LAW, PLLC			
	3823 SW 49TH PL.			111
	(Florida stree	t address)	-	
New Registered Office Address:	FORT LAUDERDALE		, Florida 33312	
	(0	City)	(Zip Ci	ode)
New Registered Agent's Signature, if c	ered agent. I am familiar wi	in and accept the obligi		
Check if applicable The amendment(s) is/are being filed po	ursuant 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)

X Change

Please note the officer/director title by the first letter of the office title:

<u>John Doe</u>

PT

 $P = President; \ V = Vice President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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 Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	S CEO	MICHAEL MAGEN	1414 NW 8TH ST.
X Add			DANIA BEACH, FL 33004
Remove			
2) Change	MGR	MAGEN VENTURES LLC	1414 NW 8TH ST.
Add			DANIA BEACH, FL 33004
X Remove Change			
Add			
Remove			
1) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
f) Change		<u> </u>	
Add			
Remove			

• •	(Be specific)
	
	
	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
If an amendment provides for an exch provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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The date of each amendment(s) adoption	November 1, 2024	io a a a
date this document was signed.		, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Departme	ies not meet the applicable statutory filing requirements, this date not of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by action was not required.	the incorporators, or board of directors without shareholder action	n and shareholder
The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes east for the amendment(s) for approval.)
The amendment(s) was/were approved be must be separately provided for each vo	y the shareholders through voting groups. The following statemer thing group entitled to vote separately on the amendment(s):	st.
"The number of votes east for the	amendment(s) was/were sufficient for approval	
by	(voting group)	
	tioning group)	
Dated	3/2e24	
Signature	M. Magen	
selected, by an	president or officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court litery by that fiduciary)	
MICHA	AEL MAGEN	
	(Typed or printed name of person signing)	
CHIEF	EXECUTIVE OFFICE & SECRETARY	
	(Title of person signing)	