## P98000047966

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPO                      | Salestech Develop                           | ment Corporation  |  |
|------------------------------------|---|---|--|
|                                    | P98000047966                                |   |  |
| DOCUMENT NUM                       | BER:  |   |  |
| The enclosed Articles              | s of Amendment and fee are sub              | omitted for filing.   |  |
| Please return all corre            | espondence concerning this mat              | ter to the following:   |  |
|                                    | Gerald Irlinger                             |   |  |
|                                    |   | Name of Contact Person  |  |
|                                    | Salestech Development Corp                  | oration. dba/Videoconnex  | :  |
|                                    | 4959 Shoreline Cir.                         | Firm/ Company   |  |
|                                    |   | Address   | <u> </u>   |
|                                    | Sanford , Florida 32771                     |   |  |
|                                    |   | City/ State and Zip Code  | · · · · · · · · · · · · · · · · · · ·  |
|                                    | gerald.irlinger@videoconnex                 | c.net   |  |
|                                    | E-mail address: (to be us                   | ed for future annual report                                       | notification)  |
|                                    |   |   |  |
| For further information            | on concerning this matter, pleas            | e call:   |  |
| Gerald Irlinger                    |   | 407<br>at (   | 687-5221   |
| Name                               | of Contact Person                           |   | de & Daytime Telephone Number  |
| Enclosed is a check f              | or the following amount made p              | payable to the Florida Depa                                       | ertment of State:  |
| □ \$35 Filing Fee                  | ☐\$43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address  Amendment Section |   |   | Address<br>ment Section  |
|                                    | vision of Corporations                      |   | n of Corporations  |
| P.C                                | D. Box 6327                                 | The Co  | entre of Tallahassee   |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

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of

| Salestech Development Corporation  |                              |                                 |                                 |
|--|------------------------------|---------------------------------|---------------------------------|
| (Name o  | f Corporation as current     | ly filed with the Florida Dept. | ef.State)                       |
| P98000047966   |                              |                                 | 7 23 Aii 8: 35                  |
|  | (Document Number of          | of Corporation (if known)       |                                 |
| Pursuant to the provisions of section 607. its Articles of Incorporation:  | 1006, Florida Statutes, this | Florida Profit Corporation ad   | opts the following amendment(s) |
| A. If amending name, enter the new na  | me of the corporation:       |                                 |                                 |
|  |                              | <del></del>                     | The new                         |
| name must be distinguishable and contain<br>"Inc.," or Co.," or the designation "C<br>"chartered," "professional association." | orp," "Inc," or "Co".        | A professional corporation na   |                                 |
|  |                              | 4959 Shoreline Cir.             |                                 |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)                      |                              | Sanford, Fl. 32771              |                                 |
|  |                              |                                 |                                 |
| C. Enter new mailing address, if appli<br>(Mailing address MAY BE A POST)  |                              | 4959 Shoreline Cir.             |                                 |
|  |                              | Sanford, Fl. 32771              |                                 |
|  |                              |                                 |                                 |
| D. If amending the registered agent an new registered agent and/or the new   |                              |                                 | ne of the                       |
| Name of New Registered Agent   | Gerald Irlinger              | <u> </u>                        |                                 |
| pane of their registered rigen   | 4959 Shoreline Cir.          |                                 |                                 |
| New Registered Office Address:   | (Florida st<br>Sanford       | reet address)                   | 32771<br>Florida                |
| New Registered Office Hadress.   |                              | (City)                          | (Zip Code)                      |

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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)

Example:

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>    | <u>John Doe</u> |                        |
|----------------------------|--------------|-----------------|------------------------|
| 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                  | D            | Sahadi, Patti   | 5053 Hawks Hammock Way |
| Add                        |              |                 | Sanford, Fl. 32771     |
| x Remove                   |              |                 |                        |
| 2) Change                  | COO/<br>VP   | Ingels, Donn F  | 5053 Hawks Hammock Way |
| Add                        |              |                 | Sanford, Fl. 32771     |
| Remove 3) Change           |              | <del></del>     |                        |
| Add                        |              |                 |                        |
| Remove                     |              |                 |                        |
| 4) Change                  |              |                 |                        |
| Add                        |              |                 |                        |
| Remove                     |              |                 |                        |
| 5) Change                  |              |                 |                        |
| Add                        |              |                 |                        |
| Remove                     |              |                 |                        |
| 6) Change                  |              |                 |                        |
| Add                        |              |                 |                        |
| Remove                     |              |                 |                        |

|             | or adding additional Artitional Sectional Sectional Sheets, if necessary). | (Be specific)      | (s) nere:         |                   |  |
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| If an ameno | lment provides for an exch   | ıange reclassifica | tion or cancellat | ion of issued sha | res  |
| provisions  | for implementing the ame   | ndment if not con  | tained in the am  | endment itself:   |  |
| (if not     | applicable, indicate N/A)  |                    |                   |                   |  |
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May 17, 2024

| The date of each amendment(s) add date this document was signed.                    | option:  |   | , if other than the       |
|---|--|---|---------------------------|
| Effective date <u>if applicable</u> :   |  | ·   |                           |
|   | (no more than 90   | days after amendment file date)   |                           |
| Note: If the date inserted in this blo document's effective date on the Department. |  | ble statutory filing requirements, this date  | will not be listed as the |
| Adoption of Amendment(s)  | (CHECK ONE)  |   |                           |
| ☐ The amendment(s) was/were adoptaction was not required.                           | ted by the incorporators, or bo  | oard of directors without shareholder action  | and shareholder           |
| The amendment(s) was/were adop<br>by the shareholders was/were suff                 | =  | number of votes cast for the amendment(s)   |                           |
|   |  | igh voting groups. The following statement ote separately on the amendment(s):        |                           |
| "The number of votes cast fo  | or the amendment(s) was/were   | sufficient for approval   |                           |
| by  | (voting group)   |   |                           |
|   | (voting group)   |   |                           |
| Dated   | 5-17-2024  |   |                           |
| Signature   | 11/1/  | r if directors or officers have not been  |                           |
| selected,   | ector, president or other office<br>by an incorporator – if in the<br>d fiduciary by that fiduciary) | r if directors or officers have not been hands of a receiver, trustee, or other court |                           |
| _   | Gerald<br>(Typed or printed na   | Irlinger ame of person signing  | <del></del>               |
|   | Presio   |   |                           |
| _   | (Title of person sign  |   | <del></del>               |
|   |  |   |                           |