P9900000 2542

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Network Tallahass	see. INc	
	BER: P99000002542		
The enclosed Articles	of Amendment and fee are se	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	E. Blaise Traynham		
		Name of Contact Person)
	Network Tallahassee, inc		
		Firm/ Company	·
	2450 TIM GAMBLE PLAC		
		Address	
	Tallahassee, FL 32308		
		City/ State and Zip Code	2
Т	-hC1G1		
Tray	nhamGroup1@gmail.com	sed for future annual report	
	n-man address, (to be u	sed for future annual report	nouncation)
For further informatio	n concerning this matter, pleas	se call:	
Blaise Traynham		at (850	510-1836
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fe	or the following amount made	payable to the Florida Depa	rtment of State:
S35 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)
Mai	iling Address	Street	Address
	endment Section		ment Section
	ision of Corporations		n of Corporations
	. Box 6327 ahassee, FL 32314		Building xecutive Center Circle
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Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Network Tallahassee, INc					
(<u>Name</u>	of Corporation as curre	ntly filed with the Florid	a Dept. of State)		
P99000002542					
	(Document Number	r of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	nis <i>Florida Profit Corpora</i>	tion adopts the following	amendment(s) t
A. If amending name, enter the new n	ame of the corporation:				
				The new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	uation "Corp," "Inc." or	r "Co". A professional c			
B. Enter new principal office address,	if applicable.			26	
(Principal office address MUST BE A S					
				APR	 5⁴~
				29 	
C. Enter new mailing address, if appl	iaabla			P	33.
(Mailing address MAY BE A POST				AM II: 30	; 1
				30	,~
D. If amending the registered agent ar	nd/or registered office ac	ddress in Florida, enter tl	ne name of the		
new registered agent and/or the ne		ess:			
Name of New Registered Agent	E. Blaise Traynham				
	2450 Tim Gamble Place, STE 250				
	(Florida	street address)			
New Registered Office Address:	Tallahassee, FL		, Florida 32309		
		(City)	(Zip Ce	ide)	

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.

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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 Doc			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) Change	P,D	Harvey, E. Blaise	2450 TIM GAMBLE PLACE		
Add			Tallahassee, FL 32308		
X Remove		•			
2) Change	P.D	Traynham, E. Blaise	2450 Tim Gamble Place		
X Add			Tallahassee, FL 32308		
Remove					
3) Change	V. D	Perrine, Edward Lee II	2450 Tim Gamble Place		
Add			Tallahassee, FL 32308		
X Remove					
4) Change	D	Merrick, David F	2450 Tim Gamble Place		
Add			Tallahassee, FL 32308		
X Remove					
5) Change	-·· <u>-</u> -	_ · ·			
Add					
Remove					
6) Change					
Add					
Remove					

	ets, if necessary).	(Be specific)				
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	April 20, 2020	
the date of each amendment(s date this document was signed.	adoption:	, 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 the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date we Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
4-28-20 Dated	020	
Signature	a director, president or other officer – if directors or officers have not been	
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	E Blaise Traynham	
	(Typed or printed name of person signing)	
	President & Director Bles Sel Pays Veru	
	(Title of person signing)	