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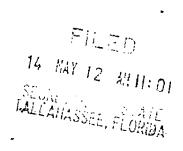
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

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Division of Corporations			
NAME OF CORPORATION: UPPERV	OIP INC		
DOCUMENT NUMBER: P12000000	642		
The enclosed Articles of Amendment and fee are	e submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
JC ECHEVER	RIA		
	Name of Contact Person	1	
ECHEVERRIA	& ASSOCIATES F	P.A.	
	Firm/ Company		
7900 SW 57 A	VE STE 12		
	Address		
SOUTH MIAMI	, FL 33143		
<del> </del>	City/ State and Zip Code	2	
JECHEVERRIA@E	ECHEVERRIAPA.	COM	
	e used for future annual report		
For further information concerning this matter, p	lease call:		
JC ECHEVERRIA	at (786	718.1490	
Name of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for the following amount ma	de payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee Certificate of Statu		☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address	<u>S</u> treet	Address	
Amendment Section	Amend	Amendment Section	
Division of Corporations P.O. Box 6327		on of Corporations	
Tallahassee, FL 32314		Building Executive Center Circle	

Tallahassee, FL 32301



## Articles of Amendment to Articles of Incorporation of

UPPERVOIP INC			
	s currently filed with the F	lorida Dept, of State	
P1200000642	nt Simple a of Company	£1	
(Docume	nt Number of Corporation ()	( known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Carporation adopts the following	g amendment(s) to
A. If amending name, enter the new n			
VBH ENGINEERING IN	C		The new
name must be distinguishable and con "Corp " "Inc." or Co.," or the design word "chartered." "professional associa	nation "Corp." "Inc." or "	o," "company," or "incorporated" or the al Co". A professional corporation name must c P.A."	obreviation contain the
B. Enter new principal office address,	if annlicable:	7900 SW 57 AVE, STE 12	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		SOUTH MIAMI, FL 33143	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7900 SW 57 AVE, STE 12	
		SOUTH MIAMI, FL 33143	
D. If amending the registered agent an new registered agent and/or the new	nd/or registered office addr	ess in Florida, enter the name of the	
Name of New Registered Agent		ASSOCIATES P.A.	
Name oj New Registerea Agent	7900 SW 57 AV	· · · · · · · · · · · · · · · · · · ·	
	Florida sine		
New Registered Office Address:	SOUTH MIAMI Florida 33143		
	(City)	¿Zip Codes	
New Registered Agent's Signature, if	Registered Agent:		
I hereby accept the appointment except	sed agent. I am familiar w	ath and accept the obligations of the position.	
$\int S_{ij}$	gnature of New Registered A	gent, if changing	
/			

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 = Chairmon or Cierk; CEO = Cinel Executive Officer; CFO = Clinel 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</u>	1 Doc	
X Remove	Y Mik	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u> Title</u>	<u>Name</u>	Address
1) Change	PTDS	DANIELE BIANCHINI	7900 SW 57 AVE STE 12
Add			SOUTH MIAMI, FL 33143
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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If an amendment proyides for a	n a-abunan maala	erifiantium on anne	allation of issued (	hara
provisions for implementing th	e amendment if n	ot contained in the	amendment itself:	naics
(if not applicable, indicate N	∂A)			•
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The date of each amendment(s) adoption: 01/01/2014	if other than the
date this document was signed.	
Effective date if applicable:	
two more than 90 days after amendment file dates	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement unist be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was:were sufficient for approval	
by	
(voting group)	
The amendment(s) was were adopted by the board of directors without shareholder action and shareholder action was not required	
The amendment(s) was were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated MAY 05, 2014	
Day 1 Book	
Signature  (By a director, president or other officer – it directors or officers have not been	_
suffered, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
DANIELE BIANCHINI	
(Typed or printed name of person signing)	- <del>-</del>
DIRECTOR	
(Title of person signing)	<del></del>