Page 1 of 2

Division of Corporations

Department of Division of Corporations ectronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170000351073)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : GIBBONS, NEUMAN, BELLO, SEGALL, ALLEN F. HALLORAN, P.A.

Account Number: I2000000178 Phone : (813)877-9222

Fax Number : (813)877-9290

\*\*Enter the email address for this business entity to be used for further annual report mailings. Enter only one email address please.\*\*

Email Address: rockerwilliamc@gmail.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN METROPOLITAN SYSTEMS, INC.

	<del></del>
Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

S. TALLENT FEB 07 2017

Electronic Filing Menu

Corporate Filing Menu

<i>(((</i> 用1700035107_3			
	• •	 	•
1 ( 1 H   7 H   H   X   H   H   X	. 1	 1	п

	;	<u>COVER LETTER</u>	
TO: Amendment Section of Corp.	orations		
NAME OF CORPO	RATION: METROPOLITA	N SYSTEMS, INC.	
DOCUMENT NUM			
The enclosed Articles	of Amendment and fee are s	ubmitted for filing.	
Please return all corre	spondence concerning this m	atter to the following:	
	Gary A. Gibbons, Esq.		
		Name of Contact Perso	n
	Gibbons   Neuman		
	:	Firm/ Company	
	3321 Henderson Blvd.		
	Tampa, FL 33609	Address	
		City/ State and Zip Cod	ie
rocke	rwilliamc@gmail.com	,	/
	<del>-</del> -	sed for future annual report	notification)
	:		
For further information	concerning this matter, plea	se cull:	
Gary A. Gibbons, Esq	•	et ( <sup>813</sup>	877-9222
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐343.75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street. Amend Divisio Clifton 2661 E	Address iment Section in of Corporations Building executive Center Circle essee, FL 32301

(((H17000035107 3)))

## Articles of Amendment to Articles of Incorporation of

METROPOLITAN SYSTEMS, INC.			
(Name of Corporation as curre	ently filed with the Florida Dept.	of State)	
364939			
(Document Number	r of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	nis Florida Profit Corporation add	pts the following amendme	eut(s) to
A. If amending name, enter the new name of the corporation:			
		The new	
name must be distinguishable and contain the word "corpore "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." o word "chartered," "professional association," or the abbreviation	r "Co". A professional corporate	ated" or the abbreviation on name must contain the	
B. Enter new principal office address. if applicable:	·	<u> </u>	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		FS.	7
			FF -
			ω •
C. Enter new mailing address, if applicable:			on [
(Mailing address MAY BE A POST OFFICE BOX)		<u>्र भारत</u> ३	; E (
			.n. `
		응설 :	<del></del>
			7
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr	dress in Florida, enter the name	of the	
new registered agent and/or the new registered office addr	<b>9381</b>		
Name of New Registered Agent			
(Plorida	street address)		
New Registered Office Address:		lorida	
	(City)	(Zip Code)	
vew Registered Agent's Signature, if changing Registered Age	n#		
hereby accept the appointment as registered agent. I am familia		f the position.	
Constant	Registered Agent, If changing	<del></del>	
bignature by New	подыначи пдені, у снапуну		•

## (((H17000035107 3)))

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 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	PT	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	•
Type of Action (Check One)	Title	Name	Address
1) Change	VP	JAMES D. HAAF JR	3014 Horatio Street
Add			Tampa, FL 33609
X Remove			
2) X Change	VD	RICARDO HORRNIK	3014 Horatio Street
Add			Tampa, FL 33609
Remove			
3)Change		_	3014 Horatio Street
Add			Tampa, FL 33609
Remove			
4) Change			
Add			
Remove			
5) Change	<u>,</u>		
Remove			
6) Change			
Add			
Remove			

((HI\00003210)	3)))

Attac	nending or adding additional ch additional sheets, if necessar	y). (Be specific)	<del></del> -		•
				,	
,				· · · · · · · · · · · · · · · · · · ·	
		<del></del> .			·
			····		
			<u></u>		
rov	amendment provides for an eislons for implementing the a lif not applicable, indicate N/A	mendment if not cor	ntion, or cancellation ntained in the amen	n of issued shares, dment itself:	
		·		······	
		····			
				1	

## (((H1700003510733)))

Gibbons, Neuman

The date of each amendment(s) adoption:, if other than the date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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 must 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
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
Dated 2667  Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
SPONETARI NOGOTAN
(Title of person signing)