PDDDDD000109414

(Re	questor's Name)			
(Ad	dress)			
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PICK-UP	WAIT	MAIL		
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(Document Number)				
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Special Instructions to	Filing Officer:	·		





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SECRETARY OF STARY

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COVER LETTER

TO: Amendment Section Division of Corporations

C11 -	. (;)				
NAME OF CORPORATION: SKY Te	K Wireless Solutions	Inc.			
DOCUMENT NUMBER: P00000109414					
The enclosed Articles of Amendment and fee are su	bmitted for filing.				
Please return all correspondence concerning this matter to the following:					
	Name of Contact Person				
Sky Tek Wireless Solutions Firm/Company					
Firm/ Company					
6625 55 ^t '	~ St N; #140				
	7 tuur C33	······································			
Pinellas	Park FL 33781 City/ State and Zip Code				
	City/ State and Zip Code				
Into a sky	itekwireless. Com				
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, pleas	se call:				
Ian Conway	at (727) 768 - 011	8			
Name of Contact Person	Area Code & Daytime Telephon				
Enclosed is a check for the following amount made payable to the Florida Department of State:					
Enclosed is a check for the following amount made	payable to the Florida Department of State.				
□ \$35 Filing Fee □\$43.75 Filing Fee &	■\$43.75 Filing Fee & □\$52.50 Filing Fee				
Certificate of Status	Certified Copy Certificate of Status	S			
	(Additional copy is Certified Copy				
	enclosed) (Additional Copy				
	Paid is enclosed)				
Mailing Address	Street Address				
Amendment Section	Amendment Section				
Division of Corporations	Division of Corporations				
P.O. Box 6327 Clifton Building					
Tallahassee, FL 32314	2661 Executive Center Circle				

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 22, 2015

GLEN LAWSON SKY TEK WIRELESS SOLUTIONS, INC. 6625 55TH ST., N - STE. 140 PINELLAS PARK, FL 33781

SUBJECT: SKY TEK WIRELESS SOLUTIONS, INC.

Ref. Number: P00000109414

We have received your document for SKY TEK WIRELESS SOLUTIONS, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 915A00010866

Articles of Amendment

to

Articles of Incor	poration
	Slutions, Inc
PACACIANULU AS CUTTERINY	ned with the Florida Dept. of State)
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Statutes, the statutes of the stat	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
SKyTek Construction Serv name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co	" "company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
word "chartered," "professional association," or the abbreviation "P.	A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
(Frincipul office unuress MOST BE A STREET ADDRESS)	
	5 S
	7
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2:
	2 -
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	t uddrass!
New Registered Office Address: (C	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.
Ciaratum of Nam Pag	viatory of Agant if alignating

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 Do	<u>c</u>	
X Remove	<u>V</u>	Mike Joi	nes	
X Add	<u>sv</u>	Sally Sm	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>	·	Name	Address
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add		_		
Remove				
5) Change				
Add				
Add				
Kemove				-
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
	
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	·
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
	ndment if not contained in the emendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	nument if not contained in the amendment usen.
provisions for implementing the ame	indifferent if not contained in the amendment tisen.
provisions for implementing the ame	

The date of each amendment(s) adoption:			, if other than the
date this document was signed.			
Effective date if applicable:	(no more than 9	0 days after amendment file date)	
Note: If the date inserted in this block dood document's effective date on the Departmen		cable statutory filing requirements, th	is date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by by the shareholders was/were sufficient to		e number of votes cast for the amendn	nent(s)
☐ The amendment(s) was/were approved by must be separately provided for each vo			
"The number of votes cast for the a	mendment(s) was/wer	re sufficient for approval	
by			
	(voting group)		
☐ The amendment(s) was/were adopted by action was not required.	the board of directors	without shareholder action and share	holder
☐ The amendment(s) was/were adopted by action was not required.		nout shareholder action and sharehold	er
Dated 6/2/	115		
Signature	-		
(By a director selected, by an		cer – if directors or officers have not be hands of a receiver, trustee, or other)	
,	GIEN J.	LAWSON name of person signing)	
 -			-
	Pre	sident	

(Title of person signing)