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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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2022 HAR - 2 AM 11:5

4 3/10/2022

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPO	RATION: SATCOM DIREC	T COMMUNICATIONS, I	NC.		
DOCUMENT NUM	P03000073814				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Drew Haggard				
	Name of Contact Person				
	Satcom Direct Government, Inc.				
	Firm/ Company				
	1050 Satcom Lane				
	Address				
	Melbourne, FL 32940				
	City/ State and Zip Code				
	legal@satcomdirect.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas		610-5832		
Name	of Contact Person	at (Area Co) 610-5832 de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made				
☐ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, Fl. 32303

Articles of Amendment to Articles of Incorporation of

FILED

SATCOM DIRECT COMMUNICATIONS, INC.

2022 MAR -2 AM 11:51

(<u>Name o</u>	f Corporation as currently	filed with the Florida Dept.cof.State) U. STATE	
P03000073814	00073814 TALLAHASSEE, FL		
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1 s Articles of Incorporation:	1006, Florida Statutes, this F	Clorida Profit Corporation adopts the following amendment(s)	
A. If amending name, enter the new na	me of the corporation:		
Satcom Direct Government, Inc.		The new	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp, " "Inc, " or "Co". A	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word	
3. Enter new principal office address, i	if annlicable:	N/A	
Principal office address MUST BE A ST			
Enter new mailing address, if applie	cable:		
(Mailing address MAY BE A POST C		N/A	
). If amending the registered agent and			
new registered agent and/or the new			
Name of New Registered Agent	N/A		
	tFlorida stre	et address)	
New Registered Office Address:	N/A	, Florida	
	1	City) (Zip Code)	
	1	City) (Zip Code)	
ew Registered Agent's Signature, if ch		ith and accept the obligations of the position.	
nerenx accement amenanamen ax revisir	yanın - anı yanınını -	was a series of the formation of the formation	
nereny accept the appointment as registe			
петеоў ассерсте арроніты из гедіяс			
nereo, accept the appointment as registe		gistered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being tiled 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>	John Doe	
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>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove 3) Change		. 	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attac	ending or adding additional Articles, enter change(s) here: h additional sheets, if necessary). (Be specific)
N/A	
	<u> </u>
	
-	
-	
F. <u>If an</u>	amendment provides for an exchange, reclassification, or cancellation of issued shares,
prov	isions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A	
	· · · · · · · · · · · · · · · · · · ·

	N/A	
The date of each amendment(s) a	doption:	, if other than the
date this document was signed. N/A		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date	rj
Note: If the date inserted in this bedocument's effective date on the Do	lock does not meet the applicable statutory filing requirement partment of State's records.	its, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sharel	nolder action and shareholder
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the an efficient for approval.	nendment(s)
must be separately provided for	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	**	
V	(voting group)	
March 1, 2 Dated	022	
Signature	m m	
(By a d selecte	rector, president or other officer – if directors or officers have d, by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)	
	Drew Haggard	
	(Typed or printed name of person signing)	
	Secretary	
	(Title of person signing)	