P05000021474

| (R | equestor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
| (Bo | usiness Entity Nan | ne) |
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| Certified Copies | Certificates | of Status |
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| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE STORY OF CORPORATIONS
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Office Use Only

A 1 Hidalgo GAVE

AUTHORIZATION BY PHONE TO

Selete Sect for Chg. of TNCorporator

CORRECT

DATE 4/14/05

Amend.

184/14

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF | CORPORATION: SUNSHINE | MICROCOMP | SYSTEMS INC. | |
|--------------------------------|--|------------------|--|--|
| DOCUMEN | T NUMBER: P05000021474 | | | |
| The enclosed | d Articles of Amendment and fee | e are submitte | ed for filing. | |
| Please return | all correspondence concerning | this matter to | the following: | |
| | ELIZ | ABETH HIDAI | LGO | |
| | (Nan | ne of Contact Po | erson) | |
| | RELIGIOUS & FAMILY TRA | VELS INC. | | |
| | | (Firm/ Company | y) | |
| | 2851 WEST 68 STREET # 12 | (Address) | | |
| For further in | HIALEAH FLORIDA 33016 (City) Information concerning this matte | / State/ and Zip | | |
| LIZ HIDALGO | | at (| | |
| Enclosed is a □ \$35 Filing F | (Name of Contact Person) a check for the following amount see \$43.75 Filing Fee & Certificate of Status | \$43 Cei | (Area Code & Daytime 3.75 Filing Fee & rtified Copy | □ \$52.50 Filing Fee Certificate of Status |
| | Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | (Ac | Street Address Amendment Secti Division of Corpo 409 E. Gaines Stre Tallahassee, FL 33 | Certified Copy (Additional Copy is enclosed) on orations |

in a wint of the



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 9, 2005

ELIZABETH HIDALGO 2851 W. 68 STREET #12 HIALEAH, FL 33016

SUBJECT: SUNSHINE MICROCOMP SYSTEMS INC.

Ref. Number: P05000021474

Reed 4/05

We have received your document for SUNSHINE MICROCOMP SYSTEMS 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 document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

The designation of the registered agent must be at a Florida street address.

The incorporator(s) cannot be amended or changed. Please correct your document accordingly.

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) 245-6909.

Velma Shepard Document Specialist

Letter Number: 405A00016327

Articles of Amendment to Articles of Incorporation of



SUNSHINE MICROCOMP SYSTEMS INC.

P05000021474

(Name of corporation as currently filed with the Florida Dept. of State)

(Document number of corporation (if known)

| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation: |
|---|
| NEW CORPORATE NAMÉ (if changing): |
| SAME CORPORATE NAME |
| (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") |
| AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) |
| ARTICLE II -PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS: |
| 1755 W 60 STREET # D-304- HIALEAH FLORIDA 33012 (DELETE) |
| 17650 NW 67TH AVENUE MIAMI LAKES FL. 33015 (ADD) |
| ARTICLE IV- NAME AND ADDRESS OF THE REGISTERED AGENT: |
| CARLOS VILLAMUES - PRESIDENT (DELETE) |
| GERMAN S. OTERO -NEW PRESIDENT (ADD) |
| |
| |
| |
| (Attach additional pages if necessary) |
| If an amendment provides for exchange, reclassification, or cancellation of issued shares, provision for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate Not contained in the amendment itself) |
| NA |
| |
| |

(continued)

| The date of each amendment(s) adoption: 02/22/2005 | | | | |
|--|--|--|--|--|
| Effective date if applicable: 02/22/2005 | | | | |
| (no more than 90 days after amendment file date) | | | | |
| Adoption of Amendment(s) (CHECK ONE) | | | | |
| The amendment(s) was/were approved 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 | | | | |
| (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. | | | | |
| Signed this 23RD day of FEBRUARY 2005 | | | | |
| Signature X Cax Las Villamues | | | | |
| (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) | | | | |
| CARLOS VILLAMUES | | | | |
| (Typed or printed name of person signing) | | | | |
| PRESIDENT | | | | |
| (Title of person signing) | | | | |

FILING FEE: \$35

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

1. The name of the corporation is:

SUNSHINE MICROCOMP SYSTEMS INC.

2. The name and address of the registered agent and office is:

GERMAN S. OTERO 17650 NW 67TH AVENUE MIAMI LAKES FLORIDA 33015

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE:

FEBRUARY 14, 2005

SECRETARY OF STATE STORY OF CORPORATIONS