

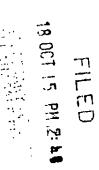




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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Computers Plus Cellphones, Inc P05000150844 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Abubaker S Mosleh Name of Contact Person Computers Plus Cellphones, Inc. Firm/ Company 54 S. Kirkman rd, ste B Address Orlando, FL 32811 City/ State and Zip Code mosleh@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407) 272-2700

Area Code & Daytime Telephone Number Abubaker S Mosleh Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$52.50 Filing Fee ■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Computers Plus Celiphones, Inc.

Vitality of Corporation as the Corporation as the Corporation and Corporation	tly filed with the Florida Dept.	of State)	
P05000150844			
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	s Florida Profit Corporation ad	opts the following amendment(s) to	
A. If amending name, enter the new name of the corporation:			
Compuwise Expert Solutions, Inc		✓ The new	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corpora		
B. Enter new principal office address, if applicable:	NA		
(Principal office address MUST BE A STREET ADDRESS)			
		<u>&</u>	
		램 및 끄	
C. Enter new mailing address, if applicable:	NA	A TO	
(Mailing address MAY BE A POST OFFICE BOX)			
		<u> </u>	
D. If amending the registered agent and/o <u>r registered office ado</u>	dress in Florida, enter the nan	ie of the	
new registered agent and/or the new registered office address	33.		
new registered agent and/or the new registered office addres	331.		
new registered agent and/or the new registered office address			
new registered agent and/or the new registered office address NA Name of New Registered Agent	areet address)		
new registered agent and/or the new registered office address NA Name of New Registered Agent		. Florida	

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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Namc</u>	<u>Addres</u> s
1) Change		NA	
Add			
Remove			
2) Change		NA	
Add			
Remove			
3) Change		NA	
Add			
Remove			
4) Change		NA	
Add			
Remove			
5) Change		NA	
Add			
Remove			
Kelikive			
6) Change		NA	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
NA			
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:			
(if not applicable, indicate N/A) NA			

_	10/06/2018	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	2100/00 10	
16 _ Effective date if applicable:	0/06/2018	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date with Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
_{bv} NA	"	
· · · · · · · · · · · · · · · · · · ·	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
•		
10/06/2 Dated	018	
Signature		
(By selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	
	Abubaker S. Mosleh	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	