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C GOLDEN
406 - 1 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Computer & Netv	vork Services Plus, Inc.	
DOCUMENT NUM	P07000074557		
The enclosed Articles	of Amendment and fee are su		
Please return all corre	espondence concerning this ma	tter to the following:	
	John Long		
		Name of Contact Person	i
	Computer & Network Serv	ices Plus, Inc.	
		Firm/ Company	
	PO Box 482		
		Address	
	Ellenton, FL 34222		
	-	City/ State and Zip Code	
info(@cnsplus.com		
	E-mail address, (to be u	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se cull:	
John Long		941	721-8899
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artiment of State:
S35 Filing Fee	☐\$43.75 Fifting Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□852.50 Filing Fee Certificate of Status Certified Copy (Additional Copy (is enclosed)
An Div P C	niling Address nendment Section vision of Corporations). Box 6327 flahassee, FL 32314	Amenc Divisio Clifton 2661 F	Address Iment Section on of Corporations of Building Executive Center Circle assec, FL 32301

Articles of Amendment to Articles of Incorporation

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Computer & Network Services Plus, Inc. s Plus, Inc.

(Name of Corporation as currently filed with the Florida Dept. of STARY OF STATE TALLAHASSEE, FL P07000074557 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc., or Co., or the designation - Corp.," "Inc.," or "Co" - 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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:

 $P \sim President; V = Vice President; T = Treasmer, S \leq Secretary; D = Director, TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held, President, Treasurer, Director would be PTD.$

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

Evample: XChange	PT John	<u>. Do</u> ę		
X Remove	<u>V</u> <u>Mike</u>	Mike Jones		
\underline{X} Add	<u>SV</u> <u>Sally</u>	Smith		
Type of Action (Check One)	Title	<u>Name</u>	Address	
1)Change	Λb	Jeannine P Long	2125 Colville Chase Drive	
Add XRemove			Ruskin, FL 33570	
2) Change				
Remove				
3) Change				
Add				
4) Change Add				
Remove				
5) Change Add				
Remove				
δ) Change Add	 .			
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary)	(Be specific)	
If an amendment provides for an exclusions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		
		

	07-23-18	
The date of each amendment(s) a late this document was signed.	loption:	, if other than the
	23-18	
Effective date <u>if applicable</u> :	ono more than 90 days after amendment file date)	
Note: If the date inserted in this A locument's effective date on the Do	block does not meet the applicable statutory filing requirements, spartment of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE)</u>	
The amendment(s) was/were ado by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amer officient for approval.	ndment(s)
	proved by the shareholders through voting groups. The jollowing 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	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ad- action was not required.	opted by the board of directors without shareholder action and shareholder	archolder
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareho	older
07-23-18 Dated		
selecto	firector president or other ordicer – if directors or officers have not do by an incorporator – if in the hands of a receiver, trustee, or of the fiduciary by that fiduciary)	
	John Long	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	