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SECRETARY OF STATE

Amend Nucis 7-26-11

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	STAR WIRELESS CORPORATION	
DOCUMENT NUMBER:	P08000058020	
The enclosed Articles of Amendment	and fee are submitted for filing.	
Please return all correspondence conc	erning this matter to the following:	
	Alejandro Kaba	
	Name of Contact Person	
	Kaba Consulting Inc	<u></u>
	Firm/ Company	旨员
	1635 E HWY 50 Suite 103	25日
	Address	智智
	Clermont FI 34711	FECENED 11 JUL 25 PH 12: 28
	City/ State and Zip Code	1.3 /
E-mail address	rocio@kabaconsulting.com s: (to be used for future annual report notification)	
For further information concerning th	is matter, please call:	
Alejandro Kaba	at (352) 243-8460	
Name of Contact Person	Area Code & Daytime Telephone Number	
Englosed is a check for the following	amount made payable to the Florida Department of State:	

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

43

STAR WIRELE	ESS CORPORATION	N 11 JUL 25 PM 3: 37
(Name of Corporation as curre	ently filed with the Florida	Dept. of State) SECRETARY on order
	000058020	JALLAHASSEE FLORIDA
	ber of Corporation (if know	n)
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	5, Florida Statutes, this <i>Flor</i>	rida Profit Corporation adopts the following
A. If amending name, enter the new name of	the corporation:	
		The new
name must be distinguishable and contain to abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "proj	designation "Corp," "Inc,"	or "Co". A professional corporation
3. Enter new principal office address, if app		181-
Principal office address <u>MUST BE A STREE</u>	<u>TADDRESS</u>)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFIC	CE BOX)	
		
. If amending the registered agent and/or r		Florida, enter the name of the
new registered agent and/or the new regis	tered office address:	
Name of New Registered Agent:		
	,	
New Registered Office Address:	(Florida street add	dress)
3		
		Elouido
-	(City)	, Florida (Zip Code)

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	US1 CORPORATION	8300 NW 53 ST. SUITE 350 DORAL FL 33166	☐ Add ☐ Remove
<u>VP</u>	JUAN REGGETI	5960 NW 99 AVE SUITE # 7 DORAL FL 33178	☑ Add ☐ Remove
			Add Remove
(allach ada	itional sheets, if necessary). (Be specifi	<i>c)</i>	
provisions	ndment provides for an exchange, reclass for implementing the amendment if napplicable, indicate N/A)	assification, or cancellation of iss ot contained in the amendment i	ued shares, tself:
		<u> </u>	

The date of each amendment(s) adoption: 7/20/2011		
	(date of adoption is required)	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment(s) e 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 c	ast for the amendment(s) was/were sufficient for approval	
by		
	voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated_7/20/2	2011	
Signature	autoutasing	
selec	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trestee, or other court nted fiduciary by that fiduciary)	
ANTONIETA SANCHEZ		
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	