P08000106228

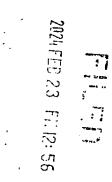
(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer	





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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: NEXTWAVE RES	SEARCH INC.						
DOCUMENT NUN	IBER: P08000106228							
The enclosed Articles of Amendment and fee are submitted for filing.								
Please return all corr	espondence concerning this ma	tter to the following:						
	JAN A. YELEN							
	Name of Contact Person							
	YELEN YELEN & SIMON, P.A.							
	Firm/ Company							
	1104 PONCE DE LEON BL	VD.						
	Address							
	CORAL GABLES, FLORIDA 33134							
		City/ State and Zip Cod	e					
	JYELEN@YELEN-YELEN.COM							
	E-mail address: (to be us	sed for future annual report	notification)					
For further informati	on concerning this matter, pleas		445-3721					
Name	of Contact Person	Area Co	de & Daytime Telephone Number					
Enclosed is a check t	or the following amount made							
S35 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		Ameno Divisio The C 2415 I	Address Innent Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303					

Articles of Amendment to Articles of Incorporation

of NEXTWAVE RESEARCH INC.

Surrently filed with the Florida Dept soft State 23 Fill 12: 56
umber of Corporation (if known)
tes, this Florida Profit Corporation adopts the following amendmen
tion:
The new
tion," "company," or "incorporated" or the abbreviation "Corp.," Co". A professional corporation name must contain the word 1 "P.A."
ice address in Florida, enter the name of the
address:
lorida street address)
, Florida
(City) (Zip Code)
(Cap)
1 Agent: uniliar with and accept the obligations of the position
matta with that accept the onlightness of the position
ii a

Check if applicable

☐ The amendment(s) is/are being filed 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>	<u>John De</u>	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>SV</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	PDST		STEPHEN M. DUNN	15652 S.W. 16TH STREET
Add		_		PEMBROKE PINES, FL 33027
X Remove				
2) Change	PDST	_	PHYLLIS T. DUNN	12601 S.W. 13 STREET, G201
X Add				PEMBROKE PINES, FL 33027
Remove 3) Change				
Add				<u> </u>
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

	ing or adding addition Iditional sheets, if neces	sary). (Be speci	fic)			
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an ame	ndment provides for a ns for implementing th	<u>in exchange, recla</u>	issification, or i	cancellation of i	issued shares,	
<u>rovisio</u>	<u>ns for implementing th</u>	<u>ae amendment if 1</u>	<u>not contained it</u>	<u>n the amendme</u>	nt itself:	
(if ne	ot applicable, indicate ?	WA)				
						
					·	
	_ 					
						_
	- 					

The date of each amendment(s):	idoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, the epartment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without shareholder	action and shareholder
■ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amenda ufficient for approval.	nent(s)
☐ The amendment(s) was/were ap must be separately provided fo	proved by the shareholders through voting groups. The following start each voting group entitled to vote separately on the amendment(s):	atement
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
select	TUATY 9, 2024 Myllio Ja Dunn Injector, president or other officer – if directors or officers have not head, by an incorporator – if in the hands of a receiver, trustee, or other need fiduciary by that fiduciary)	
	PHYLLIS T. DUNN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	