## P10000011957

| (Re                     | questor's Name)    |             |  |
|-------------------------|--------------------|-------------|--|
| (Ad                     | dress)             |             |  |
| (Ad                     | ldress)            |             |  |
| . (Ci                   | ty/State/Zip/Phone | 9 #) /      |  |
| PICK-UP                 | ☐ WAIT             | MAIL        |  |
| (Bu                     | siness Entity Nan  | ne)         |  |
| (Document Number)       |                    |             |  |
| Certified Copies        | _ Certificates     | s of Status |  |
| Special Instructions to | Filing Officer:    |             |  |
|                         |                    |             |  |
|                         | ,                  |             |  |
|                         |                    |             |  |

Office Use Only



900182599539

07/02/10--01015--011 \*\*43.75

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Amend/Manch Tan/a/10

## **COVER LETTER**

| Division of Corporations   |
|--|
| NAME OF CORPORATION: Florida Premium Autoglass Corp  |
| DOCUMENT NUMBER: <u>\$10000017957</u>  |
| The enclosed Articles of Amendment and fee are submitted for filing.   |
| Please return all correspondence concerning this matter to the following:  |
| Angel E. Abascal Name of Contact Person  |
| MIA Wireless Inc. Firm/Company   |
| 17741 S.W. 113AVE,   |
| Miami FL. 33157 City/ State and Zip Code   |
| E-mail address: (to be used for figure annual report notification)   |
| For further information concerning this matter, please call:   |
| Ancyel E. Abascal at (786) 253-1664  Name of Contact Person Area Code & Daytime Telephone Number   |
| Enclosed is a check for the following amount made payable to the Florida Department of State:  |
| □\$35 Filing Fee Certificate of Status  □\$43.75 Filing Fee & Certified Copy Certificate of Status  (Additional copy is enclosed)  □\$52.50 Filing Fee Certificate of Status  Certified Copy (Additional Copy is enclosed) |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building   |

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation of

| FLorida Premium  (Name of Corporation as current  | AU+oa                     | Na SS                    | Corp<br>ept. of State)        |                      |
|---|---------------------------|--------------------------|-------------------------------|----------------------|
| P1000001795   | <br>1                     | -                        | ,                             | بې                   |
| (Document Numbe   |                           | ion (if known            | ) .                           |                      |
| ursuant to the provisions of section 607.1006, I mendment(s) to its Articles of Incorporation:  | Florida Statut            | es, this <i>Flori</i>    | da Profit Corporat            | ion adopts the follo |
| . If amending name, enter the new name of th  | ne corporatio             | <u>n:</u>                |                               |                      |
| MIA Wiveless  | Tnc                       |                          |                               | The new              |
| ame must be distinguishable and contain the<br>bbreviation "Corp.," "Inc.," or Co.," or the de<br>ame must contain the word "chartered," "profes. | esignation "C             | orp." "Inc." (           | or "Co". A profes.            | orporated" or the    |
| Enter new principal office address, if application of the principal office address MUST BE A STREET A   |                           | 1774<br>Migmi            | <u>  S.W.   </u><br>FL. 33157 |                      |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE   | <u>'BOX</u> )             |                          | 1 S.W. 113<br>FL. 3315        |                      |
| If amending the registered agent and/or registered agent and/or the new register  |                           |                          | lorida, enter the na          | me of the            |
| Name of New Registered Agent:   |                           |                          |                               |                      |
| New Registered Office Address:  | (Flori                    | da street addr           | ess)                          |                      |
| _   | (City)                    |                          | , Florida<br>(Zip Code)       | 1                    |
|   |                           |                          | (Zip Code)                    |                      |
| ew Registered Agent's Signature, if changing bereby accept the appointment as registered agent  | Registered Ant. I am fami | gent:<br>liar with and i | accept the obligation         | ns of the position.  |
| Sign  | ature of New              | Registered As            | gent, 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>   | <u>Address</u>             | Type of Action                |
|--------------|---|----------------------------|-------------------------------|
| NP           | Jorge A. Abasca<br>Yailyn Benitez   | 190 N.W. 72<br>Might FL 3  | AVE                           |
| NP           | Yailyn Benitez  | 17741 S.W.                 | 13AVE M Add<br>33157 □ Remove |
| <u></u>      |   |                            |                               |
|              | ding or adding additional Articles, end<br>dditional sheets, if necessary). (Be spe                 |                            |                               |
|              |   |                            |                               |
| provisi      | mendment provides for an exchange, ons for implementing the amendment not applicable, indicate N/A) | if not contained in the an | nendment itself:              |
| to           | hange 50 shru<br>Yailyn Benitez   |                            | J                             |
|              |   |                            |                               |
|              |   | ·                          |                               |

| The date of each amendment                           | s) adoption:   |
|--|--|
|  | (date of adoption is required)   |
| Effective date if applicable:                        | (no more than 90 days after amendment file date)   |
| Adoption of Amendment(s)                             | (CHECK ONE)  |
| The amendment(s) was/web by the shareholders was/web | e adopted by the shareholders. The number of votes cast for the amendment(s re sufficient for approval.  |
|  | e approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):              |
| "The number of votes                                 | ast for the amendment(s) was/were sufficient for approval  |
| by   | 299  |
| •  | (voting group)   |
| The amendment(s) was/wer action was not required.    | e adopted by the board of directors without shareholder action and shareholde  |
| The amendment(s) was/wer action was not required.    | e adopted by the incorporators without shareholder action and shareholder  |
| Dated  | 06-29-10   |
|  | a director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court |
|  | inted fiduciary by that fiduciary)   |
|  | Angel E. Abascal (Typed or printed name of person signing)   |
| •  | (Typed or printed name of person signing) ,  |
|  | President  |
|  | (Title of person signing)  |