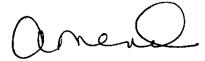
(Rec	questor's Name)	
•	,	
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(City	//State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

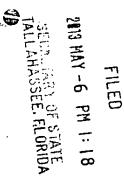
Office Use Only



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05/06/13--01022--002 **35.00



5/9/13

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	UNLIMITE R: P1000006474	O WIRELESS C	ELLULAR INC
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
ſ	MARIA E RUIZ		
- L	. M ACCOUNTIN	Name of Contact Perso	
_		Firm/ Company	
<u> </u>	750 SW 117 AV		
1	MIAMI FLORIDA	Address 33183	
		City/ State and Zip Cod	e
MAF	RIAQUIROS9@H		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
MARIA E RUI	Z	at (305	, 595-2407
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made I	payable to the Florida Dep	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. E	ng Address dment Section on of Corporations dox 6327 assee, FL 32314	Amen Divisi Cliftor 2661 I	Address dment Section on of Corporations a Building Executive Center Circle assee, FL 32301

Articles of Amendment Articles of Incorporation

FILED 2013 MAY -6 PM 1:18

UNLIMITED WIRELESS CELLULAR INC

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known)

P10000064746

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

me must be distinguishable and conta orp.," "Inc.," or Co.," or the designa				
rd "chartered," "professional association			onan Carpana	
Enter new principal office address, if incipal office address MUST BE A ST				
	:			
Enter new mailing address, if applications and the second				
(Mailing address <u>MAY BE A POST O</u>	FFICE BOX)			· · · · ·
(Mauing address <u>MAY BE A POST O</u>	FFICE BOX)		*	
If amending the registered agent and new registered agent and/or the new	or registered office addres/	s in Florida, e	nter the nam	e of the
If amending the registered agent and	or registered office addres/	s in Florida, e	nter the nam	e of the
If amending the registered agent and new registered agent and/or the new	or registered office address: registered office address:	· <u>·</u> ···	nter the nam	e of the
If amending the registered agent and new registered agent and/or the new	or registered office address: registered office address: (Florida stree	address)	nter the nam	

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 <math>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 Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Р	ALFREDO P PEREZ	3170 MCSHERRY DRIVE
$\frac{\mathbf{X}}{\mathbf{X}}_{Add}$			LAKE WORTH, FL
Remove			33461
2) Change	VP	JOHAN CAJIGAS	400 S DIXIE HWY
Add			LAKE WORTH FLORIDA 33460
X Remove			
3) Change			
Add			
Remove		e .	
4) Change			
Add		1	
Remove			
5) Change			
Add			
Remove		•	
6) Change			
Add			
Řemove			

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

The date of each amendmen	t(s) adoption: <u>U4/26/2013</u>
Effective date <u>if applicable</u> :	05/03/2013
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated 04/	/26/2013
Signature_	John Ca-
(by a director, president or other officer - if directors or officers have not been
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	JOHAN CAJIGAS
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)