P1200002312

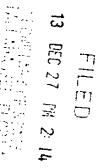
(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phone	e #)
		—
PICK-UP	☐ WAII	MAIL
(Busi	ness Entity Nar	ne)
(Docu	ıment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	lina Officer:	

Office Use Only



500254920545

12/27/13--01025--010 **43.75



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: DISTRIM	VAVE CORP	
DOCUMENT NUMBER: P12000002	2312	
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
CARLOS TOP	RRES	
DISTRIWAVE	Name of Contact Person	1
2424 NIM COT	Firm/ Company	
2134 NW 99T		
MIAMI, FL 33	Address	
	City/ State and Zip Cod	e
TAXRIGHT7@YA	AHOO.COM	
E-mail address: (to be t	used for future annual report	notification)
For further information concerning this matter, plea	ase call:	
CARLOS TORRES	at (305	, 735-3677
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
\$35 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301

Articles of Amendment to Articles of Incorporation of

DISTRIWAVE CORP			-	
(Name of Corporation as currently filed with the FP 12000002312	Slorida Dept. of State)			
(Document Number of Corporation (i	if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:		tion adopts the following	g ame	ndment(s) to
A. If amending name, enter the new name of the corporation:				
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ' word "chartered," "professional association," or the abbreviation '	'Co". A professional c		bbrevi	
	N/A	i.	ಪ	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		—————————————————————————————————————	20	
			C 27	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	18	· 译 2	ED
		: -	=	
D. If amending the registered agent and/or registered office addinew registered agent and/or the new registered office address Name of New Registered Agent N/A	ress in Florida, enter t ::	he name of the		
El., i.i.,				
New Registered Office Address: N/A		lorida		
(City)		(Zip Code)		
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar Signature of New Registered.	with and accept the obli	gations of the position.		
signature of New Registered A	agent, it 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 = 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
. 🗆			
6) L. Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here (Attach additional sheets, if necessary). (Be specific) ARTICLE IX:	2:
THE PERCENTAGE OF OWNERSHIP INTEREST I	N THE COMPANY IS AS
FOLLOW:	
NAME	% OF OWNERSHIP
NETKROM TECHNOLOGIES S.A.C.	51%
Av. Rivera Navarrete Nro. 762 Int. 901 Lima - San Is	idro
LIMA - Peru	
CARLOS TORRES	49%
F. If an amendment provides for an exchange, reclassification, or provisions for implementing the amendment if not contained (if not applicable, indicate N/A)	

The date of each amendment(s) adoption: 12/01/2013	, if other than the
date this document was signed.	
Effective date if applicable: 12/01/2013	
(no more than 90 days after amendment file date)	 -
Adoption of Amendment(s) (CHECK ONF)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 12 19 13	
Signature	
(By a director, desident or other officer – if directors or officers have not been selected, by an accorporator – if in the hands of a receiver, trustee, or other court appointed fiduciacy by that fiduciary)	vinibilities in the second sec
CARLOS TORRES	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	