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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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2018 OCT -4 PH 3: 01 SECRETARY OF STATE

C. GOLDEN 0CT - 8 2018

OVER LETTER

TO: Amendment Section

| Division of Corpor | rations | | |
|---------------------------|---|---|--|
| NAME OF CORPOR | ation: <u>Cell</u> er: <u>P12000</u> 0 | Network | Inc |
| DOCUMENT NUMBI | er: <u> </u> | 009709 | |
| The enclosed Articles o | f Amendment and fee are su | bmitted for filing. | |
| Please return all corresp | ondence concerning this ma | tter to the following: | |
| - | | Cia Zarate. Name of Contact Person | n |
| _ | Cell | Network J | nc |
| _ | 15271 | Firm/ Company NW 60th | Ave, sk 205 |
| _ | Mismi | Lokes, Fi | Are, she 205 2, 33014 |
| _ | | | |
| - | Jumira 9 6 E-mail address: (1) be us | 9mail. com | notification) |
| For further information | concerning this matter, pleas | | |
| Patricia | Zurate. | at 305 | , 321-1077 |
| Name of | f Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | artment of State: |
| X \$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) |
| | ng Address | | Address |
| | idment Section ion of Corporations | | Iment Section on of Corporations |
| P.O. 1 | Box 6327 hassee, FL 32314 | Clifton | Building executive Center Circle |
| тана: | 1148800, FL 52514 | | assee, FL 32301 |

Articles of Amendment

Articles of Incorporation

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

(Document Number of Corporation (if known)

TALLAHASSEE, STATE Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

| on," "company," or "incorporated" or the of "Co". A professional corporation name must "P.A." 15271 NW 60 ^{+h} A Klizmi LzKes FL. | t contain the |
|--|--|
| 15271 NW 60+h/A | lve Ste2 |
| Miami Lakes FL. | 33014 |
| 15271 NW 60th Are Hismi Lakes Fl | Ste 205 33014 |
| ress in Florida, enter the name of the S: | |
| rect address) | _ |
| , Florida | |
| (City) (Zip | · Code) |
| <u>t:</u> | |
| | 15271 NW 60th Are Hismi Lakes FL Iress in Florida, enter the name of the 5: rect address) (City) . Florida (Zip |

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.

| Exa mple: <u>X</u> 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 | Natne | <u>Addres</u> s |
| 1) Change | | <u> </u> | |
| Add | | | |
| Remove | | ` | \ -\ |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add \ | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | \ |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | <u> </u> |
| Add | | | `\ |
| Remove | | | <u> </u> |

Page 2 of 4

| If amending or adding additional Articles, enter change(s) here: | |
|---|--|
| Attach additional sheets, if necessary). (Be specific) | |
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| f | of insural aboves |
| f an amendment provides for an exchange, reclassification, or cancellation provisions for implementing the amendment if not contained in the amend | mont itself: |
| (if not applicable, indicate N/A) | THE ILL TANCETT. |
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| The date of each amendment(s) adoption: September 25, 2018, if other | than the |
|--|----------|
| date this document was signed. | |
| date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) | |
| Effective date if applicable: (no more than 90 days ofter amendment file date) | |
| | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. | d as the |
| Adoption of Amendment(s) (CHECK QNE) | |
| ☐ 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 cast for the amendment(s) was/were sufficient for approval | |
| by" (voting group) | |
| (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 9/25/2018 | |
| Signature + 1 2010 + C | |
| (By a director, president or other officer - if directors or officers have not been | |
| selected, by an incorporator – if in the hands of a receiver, trustee, or other court | |
| appointed fiduciary by that fiduciary) | |
| Patricia Zarate | |
| (Typed or printed name of person signing) | |
| President | |
| (Title of person signing) | |