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T. ROBERTS

COVER LETTER

-: '

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: Wireles:	S CONTRACTS	TNC
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this m	eatter to the following:	
Jeff Bu	Name of Contact Person	
	Name of Contact Person	1
Wireless	CONTrous]	[NC
	Firm/ Company	
15330 FL	ight Path T) R
	Address	
Brooksvill	p. FL 34	1604
	e FL 34 City/ State and Zip Code	e
	•	
Jeff @ Wirele	used for future annual report	SINC. COM
E-mail address: (to be t	used for future annual report	notification)
For further information concerning this matter, plea	ase call:	
TCCD		000 000)
Name of Contact Person		de & Daytime Telephone Number
Name of Contact reison	Alea Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	e payable to the Florida Depa	artment of State:
\$35 Filing Fee & Certificate of Status		□\$52:50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street	Address
Amendment Section	Amend	iment Section
Division of Corporations P.O. Box 6327		on of Corporations Building
Tallahassee, FL 32314		xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

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MITCLESS CONTROLS INC (Name of Corporation as currently filed with the Florida Dept. of State (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 13575 58th ST. North B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Suite 214 Clearwater, FL 33760 C. Enter new mailing address, if applicable: 13575 58th ST. North (Mailing address MAY BE A POST OFFICE BOX) Suite 214 Clearwater FL 33760 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida (City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, 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)

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> <u>Johr</u>	n <u>Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	<u>ce Jones</u>	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Peter Barbee	15330 Flight Path DI
Add			15330 Flight Path DI Brooksville, FL 34604
Remove			
2) Change	VP	John Calabro	19 BieLAK ST.
X Add			Orcharo Park, NY
Remove			14127
3) Change			
Add			
Remove			
(Change			
4) Change Add			
Add			
Remove			
5) Change			
Add			
Remove			
O Clave			
6) Change	· · · · · · · · · · · · · · · · · · ·		
Add			
Remove			

	eets, if necessary).	(Be specific)	(s) here:		
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provisions for imp	lementing the am	hange, reclassifica endment if not con	tion, or cancellation the ame	on of issued shares	1
provisions for imp	rovides for an exc lementing the amode, indicate N/A)	hange, reclassifica endment if not con	tion, or cancellati tained in the ame	on of issued shares adment itself:	1
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provisions for imp	elementing the amedee, indicate N/A)	hange, reclassifica endment if not con	tion, or cancellation the ame	on of issued shares adment itself:	1

The date of each amendment(s) adoption: 9 (25 (2012
Effective date if applicable: (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
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
(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 9/25/2012
(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)
Teffrey R Burns (Typed or printed name of person signing)
CEO
(Title of person signing)