## P1300005194

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bo	usiness Entity Name)
(Do	ocument Number)
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JUN 07 2013 R. WHITE TALLAHASSEE, FLORIDA

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: AMERITEC	CH SOLUTION I	NC
DOCUMENT NUMBER: P1300000512		
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
YRMA ARIAS DE	CANIZALES	
<del></del>	Name of Contact Person	1
AMERITECH SO		
	Firm/ Company	
837 N DIXIE HW	Υ	
	Address	
POMPANO BEAG	CH FL 33060	
-	City/ State and Zip Cod	e
GISELA@YOUROAS	SISING.COM	
	sed for future annual report	notification)
	•	
For further information concerning this matter, pleas	se call:	
GISELA IZAGUIRRE	at (754	, 235-3232
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  □\$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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

## **Articles of Amendment** to **Articles of Incorporation** of

FILED 13 JUN -4 AM 10: 09

## AMERITECH SOLUTION INC

(Name of Corporation as current)	ly filed with the Flo	orida Dept. of State)		NUM :
P13000005124			• • • • • • • • •	
(Document Number	r of Corporation (if	known)	11.000	-
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	orida Statutes, this F	lorida Profit Corporation	adopts the followin	g amendment(s) to
A. If amending name, enter the new name of the	e corporation:			
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or the second contact of the c	orp," "Inc," or "C	o". A professional corpo		
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	able: 1DDRESS)	N/A		-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u> )			-
D. If amending the registered agent and/or registered registered agent and/or the new registered Name of New Registered Agent		ss in Florida, enter the na	nme of the	-
	(Florida stree	et address)	_	
New Registered Office Address:		, Florid		-
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	nt. I am familiar wi	·	ons of the position.	
Signature of	f New Registered Ag	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)

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	PT	John D	<u>oe</u>	
X Remove	<u>v</u>	Mike J	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	VΡ		EGLIS VIGUERAS	1180 SE 4 AVE APT 105
Add				DEERFIELD BEACH FL 33441
X Remove				
2) Change	VP		MAURICIO CEPEDA	9725 N GRAND DUKE CIR
X Add		_		TAMARAC FL 33321
Remove				
3) Change		_ <del>_</del>		
Add				
Remove				
4) Change		<del></del>		<del></del>
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		_		
Remove				· · · · · · · · · · · · · · · · · · ·

	Iding additional A sheets, if necessary		i <u>re(s) here</u> :		
			1/2		<del></del>
			1/4		
<del> </del>		· · · · · · · · · · · · · · · · · · ·			
an_amendment	provides for an ex	cchange, reclassifi	cation, or cancell	ation of issued sha	res,
rovisions for im	plementing the arable, indicate N/A)	mendment if not c	ontained in the ar	nendment itself:	
.,	•	NA			
·			. ,		···· -··· -··
	,				
					<del></del>

he date of each amendment(s) ad	loption:5\24\\3
ffective date if applicable:	
	(no more than 90 days after amendment file date)
doption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement 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)
action was not required.	opted by the incorporators without shareholder action and shareholder
Dated	James Joans
(By a d	rector, president or other officer - if directors or officers have not been
	by an incorporator if in the hands of a receiver, trustee, or other court ded fiduciary by that fiduciary)
	MAURICIO CEPEDA POWER
	(Typed or printed name of person signing)
ι	VICE PRESIDENT
	(Title of person signing)