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Amend Mand
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COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: FASTLINE SAT	ΓELITE, INC.			
DOCUMENT NUMBER: P13000031508				
The enclosed Articles of Amendment and fee are s	submitted for filing.			
Please return all correspondence concerning this m	atter to the following:			
DENISE A. MACHADO	DENISE A. MACHADO			
-	Name of Contact Persor	1		
-	Firm/ Company			
3181 QUEEN ALEXANDR	3181 QUEEN ALEXANDRIA DR.			
	Address			
KISSIMMEE, FL 34744				
	City/ State and Zip Code	2		
FASTLINESAT@HOTMAIL.CO	PM			
E-mail address: (to be u	used for future annual report	notification)		
For further information concerning this matter, plea	ase call:			
DENISE A. MACHADO	at (729-9509		
Name of Contact Person		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	□\$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 Tallabasses, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



FASTLINE SATTELITE, INC.

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

P13000031508

(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the	following amendmen
A. If amending name, enter the new name of the corporation:		
FASTLINE SATELLITE, INC.		The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp,," "Inc." or word "chartered," "professional association." or the abbreviation	"Co". A professional corporation nar	or the abbreviation
B. Enter new principal office address, if applicable:	2108 E OSCEOLA PARKWAY	
(Principal office address MUST BE A STREET ADDRESS)	SUITE 3	
	KISSIMMEE, FL 34743	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address		
(Florida s	street address)	
New Registered Office Address:	, Florida	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia.		position.

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 D	<u>oe</u>	
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	VP	_	GILBERTO W. ALVARADO SILVA	3181 QUEEN ALEXANDRIA DR
X Add				KISSIMMEE, FL 34744
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Chanca				
6) Change				
Add				
Remove				

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)

AN CLARGE REPORT AS A S A C C	
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
JUNE 15, 2015 Effective date <u>if applicable</u> :	
(no more th	nan 90 days after amendment file date)
Note: If the date inserted in this block does not meet the adocument's effective date on the Department of State's record	applicable statutory filing requirements, this date will not be listed as the ds.
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholder must be separately provided for each voting group entitle	
"The number of votes cast for the amendment(s) was	s/were sufficient for approval
by	,,
(voting group)	
The amendment(s) was/were adopted by the board of dire action was not required.	
The amendment(s) was/were adopted by the incorporators action was not required.	s without shareholder action and shareholder
JUNE 12, 2015 Dated	
Signature Devicallochado	
	officer - if directors or officers have not been in the hands of a receiver, trustee, or other court ciary)
DENISE A. MACHADO	
(Typed or pri	nted name of person signing)
PRESIDENT	
(*)	Fitle of person signing)