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JMD CELLULARS CORP

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MAR 11 2016

I ALBRITTON

From: Jair Berrios

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To, FASTKIT CORP Fav: +1 (305) 502-0561 Page 2 of 8 03/09/2016 12:12 PM

COVERLETTER

TO: Amendment See Division of Com				
NAME OF CORPO	RATION: JMD CELLULAR	\$ CORP		
	BER: P14000020851			
	of Amendment and fee are su	bmitted for filing.		
	Spondence concerning this mat	-		
	JAIR BARRIOS	•		
		Name of Contact Person		
	BARRIOS ACCOUNTING			
		Firm/ Company		
	11386 67TH PL N			
	Address			
	WEST PALM BEACH, FL 3	3412		
		City/ State and Zip Code	:	
jbarr	ios@accountingimmigration.c	om		
<u>-</u>		ed for future amual report	notification)	
For further information	n concerning this matter, pleas	o call;		
JAIR BARRIOS		at (305	821-7878	Ext 102
Name	of Contact Person	Area Co	de & Daytime T	elephone Number
Englosed is a check to	or the following amount made p	payable to the Florida Depa	rtment of State:	
□ \$35 Filing Fec	☐\$43,75 Filing Fee & Certificate of Status	OS43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Certified Conditional is enclosed	of Status opy Copy
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahossee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

2015 MAR 10 AM 9:09

Articles of Amendment to Articles of Incorporation

IMD CELLULARS CORP	
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P14000020851	21
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
MIAMI CELL PLUS CORP	The new
name must be dissinguishable and contain the word "corporatio "Carp.," "Inc.," or Ca.," or the designation "Carp," "Inc," or "word "charlered," "professional association," or the abbreviation	on," "compuny," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office add now registered agent and/or the new registered office addres	lress in Florida, enter the name of the 13:
Name of New Registered Assut N/A	·
Different Library Control of the Con	
(Florida si	nasi riquatt)
the boundary of the same	, Florida
New Registered Office Address:	(City) (Zip Code)
MENANCHOR OF CHICAGO SIS	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	<u>u</u>
Thereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
••	••
Signature of New	Registered Agent, if changing

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 nomed 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 Doe X Ramove V Mike Jones <u> X</u> Add Sally Smith Type of Action Title Name Address (Check One) 1) ___ Chengo ____ Add ____ Remove 2) ___ Change ____ Add ____ Remove 3) ____ Change _____ Add Remove 4) ____ Change ____ Add ____ Remove

If amending the Officers and/or Directors, enter the tide and name of each officer/director being removed and title, name, and

Page	2	οſ	4
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5) ____ Change ____ Add

6) ____ Change

____ Add

__ Remove

_Remove

If agrending or adding additional Articles, enter ch (Attach additional shaets, if necessary). (Be specific,)	
I/A		
	<u></u>	<u></u>
	,	
···		
		4 3
Ye an amandarant appoids for an exphanae terlassi	Sevien or cancellation of issues	d shares
If an amendment provides for an exchange, reclassign provisious for implementing the amendment if not	contained in the amendment itse	elf:
(if not applicable, indicate N/A)	•	
/Ph		·
		
•••		·

The date of each amendment(s) adoptions date this document was signed.		, if other than the
•	•	
Effective date if applicable:	(no more than 90 days after amendment file date)	· · · · · · · · · · · · · · · · · · ·
Note: If the date inscrited in this block doc document's effective date on the Department	s not meet the applicable statutory filing requirements, this of State's records.	date will not be listed as the
Adoption of Amendment(s)	<u>Cueck one</u>)	
The amendment(s) washwere adopted by to by the shareholders washwere sufficient for	he shareholders. The number of votes east for the amendmoor approval,	nt(s)
	the shareholders through voting groups. The following stating group entitled to vote separately on the amendment(s):	ement
"The number of votes east for the an	nendment(s) was/were sufficient for approval	
by	(witing group)	
	he board of directors without shareholder rection and shareho	robic
☐ The amendment(s) was/were adopted by t action was not required.	he incorporators without shareholder action and shareholder	,
03/08/2016 Dated		
Signature · which		
(By a director, pi selected, by an in	resident or other officer – if directors or officers have not be accorporator – if in the hands of a receiver, trustee, or other of any by that fiduciary)	en gurt
MICHE	L HERNANDEZ	
- Company 47 Philosophia	(Typed or printed name of person signing)	<u></u>
PRESID	TNE	
	(Title of person signing)	