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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Mega Cell Clectronics Corp DOCUMENT NUMBER: \$ 14 0000 41044 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: O Felia M. Lizcawa

Name of Contact Person Firm/ Company Address

OrAL FC 33/66

City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: O Fella M //2 CQNO at (305) 925 4809

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: ☑ \$35 Filing Fee **□\$43.75** Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation

FILED

to

(Name of Corporation as currently filed with the Florida Dept P14000 410 4 (Document Number of Corporation (if known) and the Articles of Incorporation: A. If amending name, enter the new name of the corporation. A. If amending name, enter the new name of the corporation. "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	lopts the following amendme The new prated" or the abbreviation
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Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
. If amending the registered agent and/or registered office address in Florida, enter the nan	ne of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent OFC/1A M LIZCANO	
8737 Cake Drice # 502.	
(Florida street address)	
New Registered Office Address: DoCAC	, Florida 33166
(City)	(Zip Code)
ew Registered Agent's Signature, if changing Registered Agent:	s of the 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	PT John	<u>Doe</u>	
X Remove	V Mike	Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		ALBERTO E BAPTISTA	8353 Cake DRIVE DOTAL FL 37156
Add Remove			DOM R 33166
2) Change Add	_ρ	Ofelia M 42cano	8313 Cake DRIVE DOTAL FL 33166
Remove 3)ChangeAdd		•	
Remove 4) Change Add Remove			
5) Change Add Remove	<u></u>		
6) Change Add Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
· · · · · · · · · · · · · · · · · · ·		
		
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
		 ,
		,

The date of each amendment(s) adoption: 5/21/15 date this document was signed.	, if other than the
	er amendment file date)
(no more than 90 days afte	er amendment file date)
Note: If the date inserted in this block does not meet the applicable statu document's effective date on the Department of State's records.	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	f votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separately	
"The number of votes cast for the amendment(s) was/were sufficient	t for approval
by(voting group)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
☐ The amendment(s) was/were adopted by the board of directors without shaction was not required.	nareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without sharehaction was not required.	older action and shareholder
Dated 5/2//5 Signature (By a director, president or other officer – if director)	
Signature (By a director, president or other officer – if directed, by an incorporator – if in the hands of appointed fiduciary by that fiduciary)	ectors or officers have not been a receiver, trustee, or other court
O Fe / M 4/2 (Typed or printed name of po	LCA NO
PresidenT	signing)
(Title of person s	signing)