# P14000003473

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#### **COVER LETTER**

TO: Amendment Section Division of Corpo				MIT NIC 31 M & W.
NAME OF CORPOR	ATION: MetroWave SA In	c.		
DOCUMENT NUMB	P14000063973			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		玉
Please return all corresp	oondence concerning this ma	tter to the following:		8 · ·
	Colin Cave			
-		Name of Contact Perso	n	
-		F:/ C		
	320 NE 69 Circle	Firm/ Company		
-		Address	······································	
1	Boca Raton, Florida 33487			
-		City/ State and Zip Cod	le	
colinca	ive@caveisland.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Colin Cave		561 at (	9894426	
Name o	f Contact Person		ode & Daytime Telephone Number	<del>,</del>
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
S35 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)	
Amer Divis P.O.	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio Cliftor	Address  Iment Section on of Corporations Building Executive Center Circle	

Tallahassee, FL 32301

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



METROWAVE SA INC.

### (Name of Corporation as currently filed with the Florida Dept. of State) P14000063973 (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: MATRIX GLOBAL SOLUTIONS INC. 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." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) 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: (City) 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 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 Doe			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) Change					
Add					
Remove					
2) Change					
Add					
Remove					
3 ) Change					
Add					
Remove					
4) Change					
Add			<u> </u>		
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

E. If amending or adding a (Attach additional sheets,	additional Articles, enter e , if necessary). (Be specif	change(s) here:		
N/A	V V V V V V V V V V V V V V V V V V V	•		
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	<del>,</del>			
			·	
F. If an amendment provide provisions for implementation (if not applicable, i.e.	enting the amendment if n	ssification, or cancella	ntion of issued shares, mendment itself:	
N/A				

The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this discument's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(by the shareholders was/were sufficient for approval.	(8)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes east for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	er
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
August 28 2017	
Signature	
(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 cou appointed fiduciary by that fiduciary)	rt
Colin Cave	
(Typed or printed name of person signing)	
President	

(Title of person signing)