# P15000002583

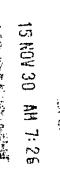
(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	☐ WAIT	MAIL
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C MCNAIK

#### **COVER LETTER**

TO: Amendment Section Division of Corpor			
NAME OF CORPORA  DOCUMENT NUMBI		<u>ewired</u> 5000002	Corp
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this mat	tter to the following:	
	5561 Coral	Address Springs City/ State and Zip Pode	ENSMITH, P.A.  SENSMITH, P.A.  ISITY Dr. #103  133067  11111111111111111111111111111111111
For further information	concerning this matter, pleas	se call:	
See Ab	Contact Person	at ( 95 \( \) Area Co	523-7601 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)
	ng Address Idment Section		Address Iment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation

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

	0002583
(Document Numb	per of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation	u.
	The new
name must be distinguishable and contain the word "corpor" Corp.," "Inc.," or Co" or the designation "Corp.," "Inc," word "chartered," "professional association," or the abbreviation.	or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u> )	· · · · · · · · · · · · · · · · · · ·
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 a new registered agent and/or the new registered office add	iddress in Florida, enter the name of the
Name of New Registered Agent	
(Florida	a street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent	
hereby accept the appointment as registered agent. I am famili	ar 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>	<u>John I</u>	<u>Doe</u>	
X Remove	¥	Mike .	lones	
X Add	<u>\$V</u>	Sally S	Smith	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change	VP/	S/D	Kesari Iyengar	5511 N. University Dr. Ste 101
X Add				Coral Springs, FL 33067
Remove				
2) Change	D		Srikanth Basavanahally	5511 N. University Dr. Ste 101
_ <u>x</u> Add				Coral Springs, FL 33067
Remove				
3 ) Change	D		Srividya Chandrashekar	5511 N. University Dr. Ste 101
X Add				Coral Springs, FL 33067
Remove				
4) Change		<u> </u>		
Add				
Remove				
5) Change				
Add				
Remove				
δ) Change		<del></del>		
Add				
Remove				

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
	<u></u>
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
· · · · · · · · · · · · · · · · · · ·	
	·

date this document was signed.	loption:, it other t	han the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed partment of State's records.	as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	roved 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	(voling group)	
	(voling group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated III	23/2015	
Signature	23/2015 In Nt	
selected	rector, president or other officer – if directors or officers have not been I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	SRIKANTH BASAVANAHALLY	
	(Typed or printed name of person signing)	
	PRESIDENT (Title of person signing)	
	(Title of person signing)	