P15000003551

| (1 | Requestor's Name) | |
|---|-------------------------|------|
| (, | Address) | |
| (, | Address) | |
| (1) | City/State/Zip/Phone #) | |
| PICK-UP | MAIT [| MAIL |
| () | Business Entity Name) | |
| (1 | Document Number) | |
| Certified Copies | Certificates of Stat | us |
| Special Instructions to Filing Officer: | | |
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SECRETARY OF STATE STATE STATE

Amend

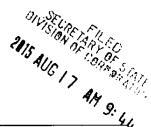
AUG 20 2015 I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION: CELLPHONE FIX | PRO 2, CORP | | | |
|--|---|--|--|--|
| DOCUMENT NUMBER: P15000003557 | | | | |
| The enclosed Articles of Amendment and fee are sub | omitted for filing. | | | |
| Please return all correspondence concerning this matt | ter to the following: | | | |
| MAURICIO J LUNA POLAN | NCO | | | |
| | Name of Contact Person | | | |
| . CELLPHONE FIX PRO 2, C | CORP | | | |
| | Firm/ Company | | | |
| 8030 PINES BLVD | | | | |
| | Address | | | |
| PEMBROKE PINES, FL 33025 | | | | |
| | City/ State and Zip Code | | | |
| AMIGOSFS@COMCAST.NET | | | | |
| E-mail address: (to be use | ed for future annual report notification) | | | |
| For further information concerning this matter, please call: | | | | |
| MAURICIO J LUNA POLANCO | at (718 915-3224 | | | |
| Name of Contact Person | Area Code & Daytime Telephone Number | | | |
| Enclosed is a check for the following amount made pa | ayable to the Florida Department of State: | | | |
| \$35 Filing Fee \$\text{Certificate of Status}\$ | 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 Tallahassee, FL 32314 | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | | |

Articles of Amendment to Articles of Incorporation of



CELLPHONE FIX PRO 2, CORP

| | | 4, |
|---|------------------------------|--|
| (Name o | of Corporation as curren | tly filed with the Florida Dept. of State) |
| P15000003557 | | |
| | (Document Number | of Corporation (if known) |
| Pursuant to the provisions of section 607. its Articles of Incorporation: | 1006, Florida Statutes, this | Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new na | me of the corporation: | |
| | | The new |
| | ation "Corp," "Inc," or | on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A." |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | | 8030 PINES BLVD |
| | | PEMBROKE PINES, FL 33025 |
| | | |
| C. Enter new mailing address, if applicable: | | GOOD DINIES DI LID |
| (Mailing address MAY BE A POST) | | 8030 PINES BLVD |
| | | PEMBROKE PINES, FL 33025 |
| | | |
| D. If amending the registered agent an | d/or registered office add | Iress in Florida, enter the name of the |
| new registered agent and/or the new | | |
| Name of New Registered Agent | MAURICIO J LUNA PO | DLANCO |
| | 114 NW 109TH AVE | |
| | (Florida s | treet address) |
| New Registered Office Address: | HOLLYWOOD | , Florida 33026 |
| | | (City) (Zip Code) |
| | | |
| | | |
| New Registered Agent's Signature, if c | | t: with and accept the obligations of the position. |
| i neven, accept me appointment as region | ereurugenn. runnsymynnur | The second secon |
| | // / | |
| | front | 11 (0) |
| | 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 | Name | Address |
| 1) X Change | <u>P</u> | MAURICIO J LUNA POLANCO | 8030 PINES BLVD |
| Add | | | PEMBROKE PINES, FL 33025 |
| Remove | | | |
| 2) Change | P | ANYINSON A DIAZ | 1980 S OCEAN DR 4M |
| Add | | | HALLANDALE, FL 33009 |
| X Remove | | | |
| 3) Change | VP | LINA MARCELA GOMEZ | 2832 FILLMORE ST #14 |
| X Add | | | HOLLYWOOD, FL 33020 |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | - |
| Add | | | |
| Remove | | | <u></u> |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| (Attach additie | nal sheets, if necessary). (Be specific) |
|-----------------|--|
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| provisions f | nent provides for an exchange, reclassification, or cancellation of issued shares, or implementing the amendment if not contained in the amendment itself: uplicable, indicate N/A) |
| EW SHARES | SSUED TO MAURICIO J LUNA POLANCO 99% AND TO LINA MARCELA GOMEZ 1% |
| | |
| - | |
| | |
| | |
| | |
| | |

| The date of each amendment(s) adoption: | , if other than the |
|--|------------------------------------|
| late this document was signed. | |
| Effective date <u>if applicable</u> : | |
| (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, t document's effective date on the Department of State's records. | his date 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 amenda by the shareholders was/were sufficient for approval. | ment(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following so must be separately provided for 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" | |
| (voting group) | |
| The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required. | eholder |
| The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required. | ler |
| Dated | |
| | |
| Signature By a director, president or other officer – if directors or officers have not | heen |
| selected, by an incorporator of in the hands of a receiver, trustee, or other | r court |
| appointed fiduciary by that fiduciary) | |
| MAURICIO I LUNA POLANCO | |
| (Typed or printed name of person signing) | |
| P | |
| (Title of person signing) | |