P150000182140

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SECRETARY OF STATE ON STATE OF STATE OF

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Loyd Communicati	on Systems Inc.			
	500018240				
The enclosed Articles of Amend	dment and fee are sul	bmitted for filing.			
Please return all correspondence	e concerning this mat	ter to the following:			
Sammy A	A. Loyd II				
	·	Name of Contact Person	n		
Loyd Co	Loyd Communication Systems Inc.				
	*******	Firm/ Company			
8 17 Palm	Forest Lane				
		Address	······································		
Minneola	a FL 34715				
		City/ State and Zip Cod	2		
lcsi.fla@aol.co	m				
		ed for future annual report	notification)		
			,		
For further information concern	ing this matter, please	e call:			
Sammy A. Loyd II		at (352	242-8823		
Name of Contact	t Person	Arca Co	de & Daytime Telephone Number		
Enclosed is a check for the follo	wing amount made p	ayable to the Florida Depa	rtment of State:		
	3.75 Filing Fee & ortificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Addr Amendment S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7	Amend Divisio Clifton 2661 E	Address Ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301		

SECRETARY OF STATE DIVISION OF CORPERATIONS

Articles of Amendment to Articles of Incorporation of 16 FEB 22 AM 11:02

Loyd Communication Systems Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P15000018240 (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: N/A 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." 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 Jönes, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	0	Anastasia L Loyd	817 Palm Forest Lane
Add			Minneola, FL 34715
X Remove			
2) Change	0	Christian A. Loyd	817 Palm Forest Lane
Add			Minneola, FL 34715
X Remove			
3) Change	VP	Ginger R. Rhodus	817 Palm Forest Lane
Add			Minneola, FL 34715
X Remove			
4) Change	0	Brandon J. Lilly	817 Palm Forest Lane
Add			Minneola, FL 34715
X Remove			
5) Change		_	
Add			······································
Remove			
6) Change			
Add			
Demove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	
F If an amendment provides for an eych	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

	February 16, 2016	•
The date of each amendment(s) add date this document was signed.	option:	, if other than the
Febru Effective date <u>if applicable</u> :	ary 16, 2016	
<u></u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date wi artment of State's records.	ll not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	5
by		B Figure
	(voting group)	% 92.0
The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder	16 FEB 22 AM II: 02
The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder	Q2 ×
February 16,	2016	
Dated	hung O. Lingt I	
	ector, president or other officer - if directors or officers have not been	
	by an incorporator – if in the hands of a receiver, trustee, or other court diduciary by that fiduciary)	
s	ammy A. Loyd II	
-	(Typed or printed name of person signing)	
P	resident	
	(Title of person signing)	