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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: MOBIL	ES WIRELESS LEG TNC					
DOCUMENT NUMBER: P1500002053						
The enclosed Articles of Amendment and	fee are submitted for filing.					
Please return all correspondence concernir	ng this matter to the following:					
HOWARD A SPEI	GEL					
	Name of Contact Perso	on				
HOWARD A SPEI	HOWARD A SPEIGEL, P.A.					
	Firm/ Company					
1801 LEE RD., SU	ITE 265					
	Address					
WINTER PARK, F	LORIDA 32789					
	City/ State and Zip Coo	de				
hspeigel@yahoo.com						
	: (to be used for future annual repor	t notification)				
For further information concerning this ma	atter, please cail:					
HOWARD A SPEIGEL	at (407	647 5700				
Name of Contact Person	Area C	ode & Daytime Telephone Number				
Enclosed is a check for the following amo	unt made payable to the Florida Der	partment of State:				
\$35 Filing Fee \$43.75 Filing Certificate o	-	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Amer s Divis Clifto 2661	t Address adment Section ion of Corporations on Building Executive Center Circle hassee, FL 32301				

## Articles of Amendment to Articles of Incorporation of

MOBILES WIRELESS INC.				
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)			
P15000020532				
(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to			
A. If amending name, enter the new name of the corporation:				
	The new			
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the			
B. Enter new principal office address, if applicable:	2295 HIAWASSEE RD			
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	SUITE 312			
	ORLANDO, FLORIDA 32835			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2295 HIAWASSEE RD.			
	SUITE312			
	ORLANDO, FLORIDA 32835			
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	dress in Florida, enter the name of the			
Name of New Registered Agent				
(Florida s	street address)			
New Registered Office Address:	, Florida(City) (Zip Code)			
	(Elp Code)			
New Registered Agent's Signature, if changing Registered Ager				
I hereby accept the appointment as registered agent. I am familian	nt: r with and accept the obligations of the position.			
hapia				
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 De	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	mith_	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	P		DONNY HANG HO	2295 HIAWASSEE RD
X Add				SUITE 312
Remove				ORLANDO, FL 32835
2) Change				
Add				
Remove				
3) Change				·
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

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an amendment p		andment if not co	ntained in the ame	ndment itself:	
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The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
Effective date if applicable:	<del></del>
(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 date document's effective date on the Department of State's records.	will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	t
"The number of votes cast 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 shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
MAY 2, 2018 Dated	
Signature (By a director, president or other officer – if directors or officers have not been	
(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 court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Title of person signing)	