P150000 49293

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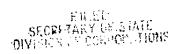
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: WirelessshackEle	ectronicCorp			
DOCUMENT NUMBI	P15000049293				
	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
A	AhmadHerz				
Name of Contact Person					
_	<u> </u>	Firm/ Company			
8	29WashingtonAve	_			
_	Address				
N	/liaml BeachFL 33139				
_		City/ State and Zip Cod	le		
*	E-mail address: (to be us	sed for future annual report	notification)		
		•	·		
For further information	concerning this matter, pleas	se call:			
ChayanBruni		305	9684258		
Name of	Contact Person	Area Co	ode & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Dep	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)		
Amen Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 nassee, FL 32314	Amen Divisi Cliftor	Address dment Section on of Corporations n Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



16 APR 20 PH 1: 54

WirelessShackElectronicsCorp		
(Name	of Corporation as currentl	y filed with the Florida Dept. of State)
P 15000049293		•
	(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	ame of the corporation:	
		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>	if applicable: TREET ADDRESS	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		
· · · · · · · · · · · · · · · · · · ·		
D. If amending the registered agent an new registered agent and/or the ne		
Name of New Registered Agent	ChayarBruni	
Name of New Registered Agent	829WashingtonAve	
		eet address)
1000 111	Miami Beach	33139 , Florida
New Registered Office Address:		(Ciry) (Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent	.
I hereby accept the appointment as regis	tered agent. I am familiar i	with and accept the obligations of the position.
	W/C	5_
	Signature of New A	evistered 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	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>	<u>Name</u>	<u>Addres</u> s
l) Change	PT	AhmadHerz	20 Islandaveapt603
Add x Remove			Miami Beach,FL 33139
2) Change	۵	AhmadHerz	20 Islandaveapt603
Add			Miami Beach,FL 33139
X Remove	РТ	CesareBruni	17150N Bayrd Apt 2111
X Add			Sunnylsles,FI 33160
Remove			
4) Change	V/D	ChayanBruni	2020N Bayshoreapt3504
X Add			Miami, Fl 33139
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	r adding additional Arti nal sheets, if necessary).	(Be specific)			
		 			
		 			
		<u></u> -			
		· · · 	<u> </u>		
					
				·	
				-	
<u> </u>					
an amendme provisions for	ent provides for an exchange the amer	ange, reclassificat adment if not cont	<u>ion, or cancellatio</u> ained in the amen	n of issued shares, dment itself:	
(if not app	olicable, indicate N/A)				
					

\	, if othe	r than the
date this document was signed.		
Effective date if applicable: (no more than 90 days after amendment file date)		_
(no more than 90 days after amenament fite date)		
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	ot be lis	ted 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(s) by the shareholders was/were sufficient for approval.		
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):		ģ
"The number of votes cast for the amendment(s) was/were sufficient for approval	16 AI	Wi SECTION
by" (voting group)	APR	- 2 kg - 24 kg
(voting group)	20	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	PH 1:	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	1: 54	10 m
April 17th2016 Dated		
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 court appointed fiduciary by that fiduciary)		
AhmadHerz		
(Typed or printed name of person signing)		-
PresidentandDirector		
(Title of person signing)		-