# P15000082677

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C. CARROTHERS

#### **COVER LETTER**

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: TRENZ WIRLESS INCORPORATED  DOCUMENT NUMBER: P 1500082677					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
NASSER NAURA Name of Contact Person					
Name of Contact Person					
ATLAS BOOKKEEPING INC Firm/Company					
Firm/ Company					
8295 TOURNAMENT DRIVE STE 150 Address					
MEMPHIS, TW 38125  City/ State and Zip Code					
INEMPHIS, IN 3812S					
Atlas CPA GROUP @ 9ma; 1. com  E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
NASSER NAURA at (972) 357-0014  Name of Contact Person Area Code & Daytime Telephone Number					
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & 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** Articles of Incorporation

of

TRENZ WIRELESS INCORPORATED	
_	filed with the Florida Dept. of State)
P15000082677	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
TRENDZ WIRELESS INCORPO	RATED The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "word "chartered," "professional association," or the abbreviation "a	," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	en en
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	्राञ्च क्रिक्ट के अपने क्रिक्ट 
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	——————————————————————————————————————
D. If amending the registered agent and/or registered office addr	
new registered agent and/or the new registered office address:	
Name of New Registered Agent	Market 11 Mark to the second s
(Florida stre	et address)
New Registered Office Address:	, Florida
•	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered Agent, if changing
G :7 * · · · · · ·	D D 1 D D D D

## 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)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add		_		
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove			·	

Attach addi	g or adding addition tional sheets, if neces	ssary). (Be spec	cific)			
			NA			
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f an amend	lment provides for a	ın exchange, recl	assification, or ca	ancellation of issu	ued shares,	
provisions (if not	for implementing that applicable, indicate it	<u>ie amendment if</u> N/4)	not contained in	<u>the amendment i</u>	tself:	
(9 //01	applicable, maicale i					
		N/A				
				<u>// /</u>		
		<del></del>				
				,	<u> </u>	····•

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
Effective date if applicable:  (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 v document's effective date on the Department of State's records.	vill 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 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):	
"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.	
Dated/0-08-2015	
Signature // 45 su	
(By a director, president or other officer – if directors or officers have not been	<del></del>
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
NASSER NAURA	
(Typed or printed name of person signing)	<del></del>
President	
(Title of person signing)	