## Florida Department of State

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lo:

Division of Corporations

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COR AMND/RESTATE/CORRECT OR O/D RESIGN ORION NETWORK SYSTEMS, INC.

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Electronic Filing Menu

Corporate Filing Menu

To:

## COVER LETTER

TO: Amendment Sec Division of Corp					
NAME OF CORPO	RATION: Orion Network S	ystems, Inc.			
DOCUMENT NUM	BER:				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	itter to the following:			
	Cheyenne Moseley				
		Name of Contact Person	n		
	LegalZoom.com, Inc.				
		Firm/ Company			
	100 W. Broadway Suite 10	00			
		Address			
	Glendale, CA 91210				
		City/ State and Zip Cod	е		
<b>f</b> a					
w.1e	rnandez80@gmail.com F-mail address: (to be us	sed for future annual report	natification)		
	D Man address. (10 00 a.	sea 101 maire amman report	invidication)		
For further information	on concerning this matter, pleas	se calt:			
Cheyenne Moseley	,	at ( 323	962-8600 ext 7950		
Name	of Contact Person	Area Co	962-8600 ext 7950 de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment of State:		
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	✓\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Am Div P.O	iling Address condment Section ision of Corporations ). Box 6327 lahassec, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

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	Articles of Amer	ndment	inc	· 一、 · · ·
	to Articles of Incorp	poration	شن ا	2
	of		7	
(No. of Co.	ORION NETWORK SY			77
(Name of Corporation as	s currently filed with the Fior P16000003			
(Docume:	nt Number of Corporation (if kn			-
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Flo	rida Profit Corporation udo	opts the following	g umendment(s)
A. If amending name, enter the new na	nme of the corporation:			
				_The new
word "chartered," "professional associa B. Enter new principal office address. (Principal office address MUST BE A S	if applicable:			
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 new	w registered office address:	in Florida, enter the name	e of the	
Name of New Registered Agent	William Valdes Fernandez			
	20340 NW 43RD PLACE			
	(Florida street			
New Registered Office Address:	MIAMI GARDENS	, Florida 3	(Zip Code)	-
New Registered Agent's Signature, if c	hanging Registered Agent:	and accept the obligations		
Si	gnature of New Registered Age	nt, if changing		

address of each Officer s (Attach additional sheets, Ploase note the officer/dir P = President; V= Vice I Executive Officer; CFO * held. President, Treasurer Changes should be noted	if necessive to the president.  Chief For Director the following the follows the columns.	irector be ary) to by the fi T= Trea inancial or would h lowing m prporation	eing added:  rst letter of the office title.  isurer: S= Secretary: D= Director: TR.º Tr Officer. If an officer/director holds more ti- be PTD.  anner. Currently John Doe is listed as the I- m. Sally Smith is named the V and S. These s	director being removed and title, name, and ustee; $C = Chairman$ or Clerk; $CEO = Chief$ han one title, list the first letter of each office $PST$ and Mike Jones is listed as the $V$ . There is hould be noted as John Doe, $PT$ as a Change,
X Change	PT	John Do	<u>c</u>	
X Remove	¥	Mike Jo	ines	
_X Add	<u>\$V</u>	Satly Sn	nith	
Type of Action (Check One)	Title		Name	Address
1) X Change	PSTD	···	William Valdes Fernandez	20340 NW 43RD PLACE
Add				MIAMI GARDENS, FL 33055
Remove				
2) Change		-		
Add				
Remove				
3) Change		-		
Add				
Remove				
4) Change		-		
Add				
Remove				
5j Change		-		
Add				
Remove				
6) Change		_		
Add				
Remove				

Page 2 of 4

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(tac	h additio	nal sheets	, if neces	sary).	(Be spec	change(s)	MOLE.				
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	{if not ap	plicable, .	indicate !	WA)							
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							<del> </del>			<del></del>	
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The date of each amendment(s date this document was signed.	) adeption: 2/9/2016	_, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	<del></del>
	ino more man so auys aper amenament jue acue)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated	2.9.16	
Signature	2.9.16 Wh M	
(By	a director, president or other officer — if directors or officers have not been octed, by an incorporator — if in the hands of a receiver, trustee, or other court officery by that fiduciary)	_
	William Valdes Fernandez	_
	(Typed or printed name of person signing)	
	President	<del>-</del>
	(Title of person signing)	