## P16000019425

Office Use Only



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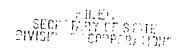
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: D&D WIRELESS	CORP		
DOCUMENT NUM	1BER: P16000019425			
The enclosed Article	es of Amendment and fee are su	abmitted for filing.		
Please return all corr	espondence concerning this ma	itter to the following:		
	DENYS SANCHEZ			
		Name of Contact Person	n	
	D&D WIRELESS CORP			
		Firm/ Company		
	1570 W 43 PL SUITE 7			
r		Address		
	HIALEAH FL 33012			
		City/ State and Zip Cod	e	
	E-mail address: (to be us	sed for future annual report	notification)	
			,	
For further informati	on concerning this matter, pleas	se call:		
DENYS SANCHEZ		786	420-1379	
		at (	_)	
Name	e of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check t	for the following amount made	payable to the Florida Depa	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)	
<u>M</u> .	ailing Address	S <u>t</u> reet	Address	
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations		
			Building executive Center Circle	
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



16 HAY -5 AM 8: 17

D&D WIRELESS CORP	o all go
<del></del>	currently filed with the Florida Dept. of State)
P16000019425	
(Document Nu	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporat	tion:
NONE	The new
	rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the
	SAME
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1570 W 43 PL
	STE 7
	HIALEAH FL 33012
D. If amending the registered agent and/or registered offi	
new registered agent and/or the new registered office a	address:
None of New Registered Agent NonE	
(Flo	orida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Office Address:	, Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Registered	1 A gent:
hereby accept the appointment as registered agent. I am fa	
	, , , , , , , , , , , , , , , , , , , ,
Signature o	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 Doe	
X Remove	<u>v</u>	Mike Jones	
X_Add		Sally Smith	
			A delana
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	JORGE MACHADO	14727 SW 46 LN
Add			MIAMI FL 33185
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	_		
Add			
Remove			

## E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)

	•	
(astrondo an)	·// magaaaa fi taraaya myayamaa man	

<del></del>	
	NONE
(	(i) not applicable, indicale IVA
mendment if not contained in the amendment itself:	provisions for implementing the
xchange, reclassification, or cancellation of issued shares,	r. 11 an amendment provides for an o
1 1 13 17 15 17 17 17 17 17 17 17 17 17 17 17 17 17	J. J
	NONE

	doption:		, if other than
ate this document was signed.	,	SECTIA	, if other than the second of
ffective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	16 1110 -	
	(no more than 90 days after amenament file date)	15 11/17 - 5	AH 0: 17
lote: If the date inserted in this locument's effective date on the De	block does not meet the applicable statutory filing requirements, epartment of State's records.	this date will n	ot be listed as
doption of Amendment(s)	( <u>CHECK ONE</u> )		
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amen afficient for approval.	dment(s)	
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment		
"The number of votes cast	for the amendment(s) was/were sufficient for approval		
by	(voting group)		
	(voting group)		
action was not required.	opted by the board of directors without shareholder action and sha		
action was not required.	opted by the incorporators without shareholder action and shareho	older	
04/27/2016 Dated	ahalo.		
(By a c	irector, president or other officer – if directors or officers have no d, by an incorporator – if in the hands of a receiver, trustee, or oth ted fiduciary by that fiduciary)		
	JORGE MACHADO		
	(Typed or printed name of person signing)		
	VICEPRESIDENT		
	(Title of person signing)		_ <del></del>