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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
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| (Document Number) |
| Certified Copies Certificates of Status |
| Optimized depicts |
| Special Instructions to Filing Officer: |
| Special instructions to 1 ming Officer. |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: Morejon Services | | | |
|-----------------------------------|--|--|--|--|
| DOCUMENT NUMI | | | <u> </u> | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | | |
| Please return all corre | spondence concerning this ma | tter to the following: | | |
| | Esley Morejon | | | |
| | | Name of Contact Person | n | |
| | Premier Custom Integrators | | | |
| • | | Firm/ Company | ··· | |
| | 9421 SW 192 Drive | | | |
| | | Address | | |
| | Miami, Florida 33157 | | | |
| | | City/ State and Zip Cod | e | |
| -1 | 70/22 13 | | | |
| esiey | 78@gmail.com | | | |
| | E-mail address: (to be us | sed for future annual report | notification) | |
| For further informatio | n concerning this matter, pleas | se call: | | |
| Esley Morejon | | 786 at (| 374-7614 | |
| Name | of Contact Person | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check fo | r the following amount made | payable to the Florida Depa | artment of State: | |
| S35 Filing Fee | ☐S43.75 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) | |
| Mailing Address Amendment Section | | | Address Iment Section | |
| Division of Corporations | | Division of Corporations | | |
| | Box 6327 | Clifton | Building | |
| Tallahassee, FL 32314 | | 2661 Executive Center Circle | | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| Morejon Services, Inc. | | |
|--|--|--|
| (Name of Corporati | ion as currently filed with the F | lorida Dept. of State) |
| P16000023780 | | |
| (Docum | nent Number of Corporation (if k | nown) |
| Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation: | a Statutes, this <i>Florida Profit Col</i> | rporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the co | orporation: | |
| Premier Custom Integrators, Inc. | | The new |
| name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the | o," "Inc," or "Co". A professio | or "incorporated" or the abbreviation |
| B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD | | |
| | | |
| | | 70.00 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO | <u></u> | |
| | <u> </u> | P C |
| D. If amending the registered agent and/or register | red office address in Florida, en | 9 |
| new registered agent and/or the new registered | office address: | |
| Name of New Registered Agent | | |
| | | |
| | (Florida street address) | |
| New Registered Office Address: | <u> </u> | Florida |
| | (City) | (Zip Code) |
| | | |
| New Registered Agent's Signature, if changing Reg | | |
| I hereby accept the appointment as registered agent. | I am familiar with and accept the | obligations of the position. |
| | | |
| | | |
| Sion | nature of New Registered Agent, it | 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 Do | <u>oe</u> | |
|-------------------------------|-----------|--------------|-------------|-------------|
| X Remove | <u>V</u> | Mike Jo | <u>ones</u> | |
| X Add | <u>sv</u> | Sally Sr | <u>nith</u> | |
| Type of Action (Check One) | Title | | Name | Address |
| 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 additional sheets, if necessary). | icles, enter change(s) here: (Be specific) |
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| f an amendment provides for an exch provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, and and in the amendment itself: |
| And the state of t | nonem not consequently the unequality visit. |
| (if not applicable, indicate N/A) | |
| (if not applicable, indicate N/A) | |
| (ij not applicable, indicate N/A) | ······································ |
| (if not applicable, indicate N/A) | |
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| (if not applicable, indicate N/A) | |
| (ij not applicable, indicate N/A) | |
| (if not applicable, indicate N/A) | |

| | 01/25/19 | | |
|---|---|---|-----------------------|
| The date of each amendment(s) ad | ption: | | , if other than |
| date this document was signed. | • | | |
| Effective date <u>if applicable</u> : | | | |
| | (no more than 90 day | ys after amendment file date) | |
| Note: If the date inserted in this bl document's effective date on the Dep | | statutory filing requirements, this date w | fill not be listed as |
| Adoption of Amendment(s) | (CHECK ONE) | | |
| ☐ The amendment(s) was/were adop by the shareholders was/were suf | | nber of votes cast for the amendment(s) | |
| ☐ The amendment(s) was/were appromust be separately provided for e | | voting groups. The following statement separately on the amendment(s): | |
| "The number of votes east f | or the amendment(s) was/were suf | ficient for approval | |
| by | (voting group) | · | |
| | (voting group) | | |
| The amendment(s) was/were adopted action was not required. | ted by the board of directors with | out shareholder action and shareholder | |
| ☐ The amendment(s) was/were adoptaction was not required. | ted by the incorporators without s | shareholder action and shareholder | |
| 01/25/19 Dated Signature | Till the state of | _ | |
| selected | | if directors or officers have not been ads of a receiver, trustee, or other court | |
| I | sley Morejon | | |
| - | (Typed or printed name | of person signing) | |
| E | resident | | |
| - | (Title of pc | rson signing) | |

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