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COVER LETTER

NAME OF CORPORATION:

ORBISAT COMMUNICATIONS INC

DOCUMENT NUMBER:

P 160000 666 10

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

EUGENIO CRESTO.

Name of Contact Person

EXDITION TO

Firm/Company

Address

DRUE #203

Address

DRUE #203

Address

Octiv/State and Zip Code

USAUTIVA @ PHD 11-COM

B-mail address: (to be used for future annual/report notification)

For further information concerning this matter, please call:

EUGENIO CRESTO

at (Area Code & Daytime Telephone Number)

□\$43,75 Filing Fee &

(Additional copy is

Certified Copy

enclosed)

Mailing Address

☐ \$35 Filing Fee

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Enclosed is a check for the following amount made payable to the Florida Department of State:

□\$43.75 Filing Fee &

Certificate of Status

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

Articles of Amendment 17 JUN -5 PH 5: 57

Articles of Incorporation 🞉 ORBISAT COMHUNICATIONS (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 2920 NW 28 TH ST. B. Enter new principal office address, if applicable: LAUDERDOLE, LAKES, FL 33311 (Principal office address MUST BE A STREET ADDRESS) 2920 NW 28 TH ST. C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) AUDERDALE LAKES FL 33311 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent

I hereby accept the appointment as registered agent. I amfifmiliar with and accept the obligations of the position.

New Registered Agent's Signature, if changing Registered Agent:

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.

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>	Address Tu
1) X Change	S	05VALDO C. 610310	2920 NW 28 ST.
Add			LAUDERDO LE LAKES, F
Remove			3331/
2) Change	P	PABLO CENA	2920 NW 28# 5T.
X Add			LOUDERDOLE LAKES, FL
Remove			33311
3) Change			
Add			
Remove			
4) Change		- .	
Add			
Remove			
5) Change			
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Remove			
6) Change			
Add	:		
Remove -		•	

	(Be specific)
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an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and and an analysis
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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f an amendment provides for an exch provisions for implementing the ame	ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date <u>if applicable</u> : (no more than 90 days after amendment	t file date)
Note: If the date inserted in this block does not meet the applicable statutory filing red document's effective date on the Department of State's records.	quirements, this date will 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 by the shareholders was/were sufficient for approval.	or the amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the a	
"The number of votes cast for the amendment(s) was/were sufficient for approva	1
by(voting group)	,, '
(voting group)	
□ The amendment(s) was/were adopted by the board of directors without shareholder act action was not required.	tion and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action a action was not required. Dated Signature	
(By a director, president or other officer – if directors or office selected, by an incorporator – if in the hands of a receiver, true appointed fiduciary by that fiduciary)	
PABLO CENA	ı
(Typed or printed name of person signing)	
President	

(Title of person signing)

COVER LETTER

Division of Corporations ORBISAT COMMUNICATIONS INC NAME OF CORPORATION: 160000 66610 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: "EUGENIO CREST Name of Contact Person EXDD TA Firm/ Company E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: EUDENIO CRES) Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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