## P16000083014

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: CABLE & DATA	MANAGEMENT, INC	
DOCUMENT NUMB	P16000083014		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
	MAC	IEL JORDANO LEMOS	
-		Name of Contact Persor	1
	CABLE	& DATA MANAGEMEN	T, INC
-		Firm/ Company	
	915	NW 1ST AVENUE SUITE	E H802
-		Address	
		MIAMI, FL 33136	
-		City/ State and Zip Code	<del></del>
	concerning this matter, pleas		
MACIEL JORDANO LEMOS		at (	
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment of State:
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□S43.75 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations i Building executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

CABLE & DATA MANAGEMENT, INC

(Name o	f Corporation as curren	ntly filed with the Flori	da Dept. of State)	
P16000083014				
<u>.</u> <u>-</u>	(Document Number	of Corporation (if know	m)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corpoi	ration adopts the following	amendment(s) to
A. If amending name, enter the new na	me of the corporation:			
N/A			3	The new
name must be distinguishable and con- "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	· "Co". A professional	"incorporated" or the abb corporation name must co	reviation mtain the
B. Enter new principal office address,	if annlicable:	N/A		
(Principal office address MUST BE A S			တ္က	2019
			2 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
				✓ Çaran
C. Enter new mailing address, if applicable:		N/A	<u>،                                    </u>	က ဂိုက်ခြ
(Mailing address MAY BE A POST)	OFFICE BOX)		1777	
				<u>ः</u>
			<u>.</u>	<del></del>
D. If amending the registered agent an new registered agent and/or the new			the name of the	
MACIEL JORDANO LEMOS				
Name of New Registered Agent	915 NW 1ST AVENUE	E APT. H802		
		street address)		
March Colons LOVE - Chiman	MIAMI		. Florida	
New Registered Office Address:		(City)	, Florida(Zip Co	ode)
New Registered Agent's Signature, if c I hereby accept the appointment as regis	hanging Registered Ago tered agent. I am familio	ent: ar with and accept the o	bligations of the position.	
	Superior of No	1		
	Simularly of Mar	w Pagistarad Agant if of		

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 Doc	
X Remove	V	Mike Jones	
_ <u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<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			

	additional sheets, if necessary). (Be specific)	
A		
lfana	imendment provides for an exchange, reclassification, or cancellation of issued shares,	
provi	isions for implementing the amendment if not contained in the amendment itself:	
(/	if not applicable, indicate N/A)	
A		

	MAY 01, 2019	:C 4 4 4
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
M. Effective date if applicable:	AY 01, 2019	
Effective date in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this department of State's records.	ite will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(sufficient for approval.	s)
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	3n1
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and sharehold	er
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
JULY 01	, 2019	
Dated	i o e o o	
selec	director, president or other officer – if directors or officers have not been ted by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
	MACIEL JORDANO LEMOS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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