P16000084432

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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Arrow System Corp DOCUMENT NUMBER: P16000084432					
	The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspo	Please return all correspondence concerning this matter to the following:				
	Barbara Ramos				
Arrow System Corp					
	Firm/ Company 19800 sw 103 ct #201				
	Miami, FL 33157				
		City/ State and Zip Code	•		
arrowsystemcorp@gmail.com E-mail address: (to be used for future annual report notification)					
For further information c	oncerning this matter, pleas	se call:			
Barbara Ramos		_{31,7} 305	,_224-3889		
Name of Contact Person			Je & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department 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)		
Mailing Address 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

Articles of Amendment

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Articles of Incorporation

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Arrow System Corp

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(Name of Corporation as currently filed with the Florida Dept. of State) P16000084432 (Document Number of Corporation (if known) SECRETARY OF STATE Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation Att A Stello flow and sendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: AIN 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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: 19800 sw 103 ct (Mailing address MAY BE A POST OFFICE BOX) #201 Miami, FL 33157 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:

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

Name of New Registered Agent

New Registered Office Address:

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

Signature of New Registered Agent, if changing

(Florida street address)

(Cirv)

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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Р	Barbara Ramos	19800 sw 103 ct
Add			#201
Remove			Miami, FL 33157
2) Change	V	Luis Paredes	19800 sw 103 ct
Add			#201
Remove			Miami, FL 33157
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<u> </u>	_	
Add			
Remove			
6) Change			
-		-	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary).— (Be specific)
AIN
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
A 1 A

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :	April 17, 2019	
	(no more than 90 days after amendm e nt f	ile date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requestrement of State's records.	tirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were as by the shareholders was/were:	lopted by the shareholders. The number of votes cast for ufficient for approval.	the amendment(s)
	proved by the shareholders through voting groups. The preach voting group entitled to vote separately on the an	
"The number of votes car	t for the amendment(s) was/were sufficient for approval	
byN		•
	(voting group)	
☐ The amendment(s) was/were a action was not required.	lopted by the board of directors without shareholder action	on and shareholder
☑ The amendment(s) was/were a action was not required.	lopted by the incorporators without shareholder action an	id shareholder
DatedJu	y 17, 2019	
Dated		
Signature		
	director president or other officer - if directors or office ed, by an incorporator - if in the hands of a receiver, trus	
	nted fiduciary by that fiduciary)	ice, or other court
	Barbara Ramos	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	