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(Document Number)
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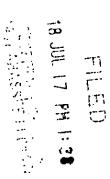
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Jours

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	AATION: SATELLITE LAK	E 2 INC		
DOCUMENT NUME	P16000090280			
The enclosed Articles	of Amendment and fee are su	ibmitted for fil	ing.	
Please return all corres	pondence concerning this ma	atter to the folk	owing:	
	CLAUDIA PEREIRA			
		Name of C	ontact Perso	n
		Firm/	Сотрапу	
	1910 LAKE WORTH RD			
	LAKE WORTH, FL 33461	Ad	dress	
	<u> </u>	City/ State	and Zip Cod	e
ramp	Brgi@gmail.com			/
	E-mail address: (to be u	sed for future a	innual report	notification)
For further information	concerning this matter, pleas	se call:		
CLAUDIA PEREIRA	at :	561	598-8652	
Name o		Агеа Со	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the	Florida Depa	irtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	\$43.75 Fi Certified (Additional enclosed)	Copy Il copy is	□\$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 Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SATELLITE LAKE 2,INC.			
(Name of Corporation as curren	tly filed with the Flor	rida Dept. of State)	
P16000090280			
(Document Number	of Corporation (if kno	wn)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corpo	oration adopts the following	amendment(s) to
A. If amending name, enter the new name of the corporation:			
N/A			Tt
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or word "chartered," "professional association," or the abbreviation	"Co". A professiona	"incorporated" or the abb	The new breviation ontain the
	N/A		i
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
		- 元子 - 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一	
		<u> </u>	
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	N/A	· .	·
			•
	-		
D. If amending the registered agent and/or registered office add		r the name of the	
new registered agent and/or the new registered office addres	<u>ss:</u>		
Name of New Registered Agent CLAUDIA PEREIRA			
1910 LAKE WORTH R	D		
(Florida s.	treet address)		
New Registered Office Address:		. Florida	
Then negistered Office inducess.	(City)	, Piorida(Zip Co	de)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar		Little advance for	
Thereby accept the appointment as registered agent. I am junitiar	with and accept the o	bligations of the position.	
	<u>~</u>		
Signature of New	Registered Agent, if ch	aanging	

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	$\underline{\mathbf{v}}$	Mike Jones		
X Add	<u>şv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	Р	· - -	DANIEL RAMIREZ FIGUEREDO	1910 LAKE WORTH RD
Add				LAKE WORTH, FL 33461
X Remove				
2) Change	Р		CLAUDIA PEREIRA	1910 LAKE WORTH RD
X Add				LAKE WORTH, FL 33461
Remove				
3) Change		_		
Add				·
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				•
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Ar (Attach additional sheets, if necessary).	(Be specific)	
N/A		
	-	-
<u> </u>		
-		
	-	
	15.	
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7	·-···	
		
N. J. C		
provisions for implementing the am	hange, reclassification, or cancellation of issued sha endment if not contained in the amendment itself:	res,
(if not applicable, indicate N/A)	chamene it not contained in the amendment usen.	
N/A		
		_
		
		<u></u>

05/01/2018	
The date of each amendment(s) adoption:date this document was signed.	, if other than the
oate this document was signed. 05/01/2018	
Effective date if applicable:	
(no more than 90 do	rys after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	nber of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	voting groups. The following statement separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were su	ifficient for approval
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors with action was not required.	nout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without action was not required.	shareholder action and shareholder
Dated Signature	_
(By a director, president or other officer - selected, by an incorporator - if in the had appointed fiduciary by that fiduciary)	
CLAUDIA PEREIRA	
(Typed or printed name	e of person signing)
PRESIDENT	
(Title of pe	erson signing)