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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: VISION WIRELE	SS GROUP INC	
DOCUMENT NUMB	P17000020718		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	YVELISSE DIAZ		
		Name of Contact Person	п
	VISION WIRELESS GROU	P INC	
	 -	Firm/ Company	
	3360 NW 72ND AVENUE		
	· · ++-	Address	
	MIAMI, FLORIDA 33122		
		City/ State and Zip Cod	e
YVEI	JSSEDIAZ58@GMAIL.CO	М	
	•	sed for future annual report	notification)
For further information	concerning this matter, pleas		632-7337
	of Contact Person	at (305	de & Daytime Telephone Number
	the following amount made		,
S35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address Indiment Section Ission of Corporations Box 6327 Islansee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

98 :01 ** 1 - 01 * 2.

Articles of Amendment to Articles of Incorporation of

	٦	/ISION	WIRI	ELESS	GROL	IP INC
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	y filed with the Florida Dept. of State)	-	_		
P17000029718					
(Document Number of	Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the follow	ing ameno	lment(s) to		
A. If amending name, enter the new name of the corporation:		****			
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cower word "chartered," "professional association," or the abbreviation ".	Co". A professional corporation name mus	The r abbreviat t contain	tion		
B. Enter new principal office address, if applicable:	10181 NW 58 STREET				
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	16				
	DORAL, FL. 33178		Jan.		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3360 NW 72ND AVENUE	7 AUG	10 40151 11 1473 11 1473		
	MIAMI, FLORIDA 33122	-	1967 1967		
		- G	- 취유 - 유유 - 오유		
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the	27.	TAIE VATION		
Name of New Registered Agent N/A			; <i>f.</i>		
		_			
(Florida stre	et address)	_			
	MIAMI				
New Registered Office Address: 3360 NW 72ND AVENUE,	MIAMI , Florida 33122				

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change	РТ	SHMUEL B BENYOSEF	3360 NW 72ND AVENUE
Add			DORAL, FL. 33178
Remove			
2) Change	S	AVIBLANKA	3360 NW 72ND AVENUE
XAdd			DORAL, FL. 33178
Remove			<u></u>
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>additiona</i>	dding additional As I sheets, if necessary)). (Be specific)				
						
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			<u>-</u>	···		
						
					 	
						
			_ 			
f an amendmen	t provides for an ex	change, reclassifi	cation, or cancella	ition of issued sha	ares.	
<u>provisions for i</u>	mplementing the an	nendment if not co	ontained in the an	nendment itself:		
(у пот арри	cahle, indicate N/A)					
·	<u> </u>		<u>.</u>		·	
				· ·		

	JULY 15, 2017	
The date of each amendment(s) adoption:	_, if other than the
date this document was signed.		
Effective date if applicable:	JULY 15, 2017	
Effective date in applicable.	(no more than 90 days after amendment file date)	
	nis block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
action was not required.	adopted by the incorporators without shareholder action and shareholder	
	15, 2017	
(By sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	_
	SHMUEL BENYOSEF	
	(Typed or printed name of person signing)	
	PRESIDENT / TREASURER	
	(Title of person signing)	