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| (Red | questor's Name) | | |
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| · (Add | dress) | | |
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| PICK-UP | WAIT | MAIL | |
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| Certified Copies | _ Certificates | of Status | |
| Special Instructions to Filing Officer: | | | |
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Office Use Only



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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORP | ORATION: COMMERCIAL V | VAVE CORP | | | |
|--|--|---|--|--|--|
| | MBER: P17000043860 | | | | |
| The enclosed Articl | es of Amendment and fee are su | bmitted for filing. | | | |
| Please return all cor | respondence concerning this ma | tter to the following: | | | |
| | JOSE R PEREZ QUIROGA | | | | |
| | | Name of Contact Person | 1 | | |
| | COMMERCIAL WAVE CORP | | | | |
| | - | Firm/ Company | | | |
| | 7739 ARBLE DR | | | | |
| | | Address | | | |
| | JACKSONVILLE FL 32211 | | | | |
| | | City/ State and Zip Cod | e | | |
| JO | 2801@YAHOO.ES | | | | |
| | | sed for future annual report | notification) | | |
| | , | • | , | | |
| For further informat | ion concerning this matter, pleas | se call: | | | |
| JOSE R PEREZ Q | UIROGA | at (⁹⁰⁴ | 4033961 | | |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number | | |
| Enclosed is a check | for the following amount made | payable to the Florida Depa | artment 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 to Articles of Incorporation

FILED

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| · · · · · · · · · · · · · · · · · · · | ntly filed with the FlorIda Dept. of State | | |
|--|--|--|--|
| P17000043860 | | | |
| (Document Number | of Corporation (if known) | | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation: | is Florida Profit Corporation adopts the following amendmen | | |
| . If amending name, enter the new name of the corporation: | | | |
| | The new | | |
| name must be distinguishable and contain the word "corporat" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation | tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the | | |
| 3. Enter new principal office address, if applicable: | JOSE R PEREZ QUIROGA | | |
| Principal office address <u>MUST BE A STREET ADDRESS</u>) | P.O.BOX 8491 | | |
| | JACKSONVILLE FL 32239 | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | JOSE R PEREZ QUIROGA | | |
| * | P.O.BOX 8491 | | |
| | JACKSONVILLE FL 32239 | | |
| D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre | | | |
| Name of New Registered Agent | | | |
| (Florida s | street address) | | |
| 1 | , Florida | | |
| New Registered Office Address: | (City) (Zip Code) | | |

Signature of New Registered Agent, if changing

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 | <u>PT</u> <u>Jol</u> | hn Doe | |
|----------------------------|----------------------|---------------------|------------------------|
| X Remove | <u>V</u> <u>Mi</u> | ike Jones | |
| X Add | <u>SV</u> <u>Sa</u> | lly Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change | MGR | FELIX FERNANDEZ | 7739 ARBLE DR |
| Add | | | JACKSONVILLE FL 32211 |
| X Remove | | | |
| 2) Change | MGR | REDYS Y PEREZ LOPEZ | 9609 SOUTH WEST 5 LANE |
| Add | | | MIAMI FL 33174 |
| X Remove | | | |
| 3) Change | | | ··· |
| Add | | | |
| Remove | | | |
| 4) Change | | - | |
| Add | | | |
| Remove | | | |
| 5) Change | | | _ |
| Add | | | |
| Remove | | | |
| 6) Change | | | _ |
| Add | | | |
| Remove | | | |

| (Attach addition | r adding additional nal sheets, if necesso | ary). (Be sp | pecific) | | |
|------------------|---|---|-----------------|---------------------------------------|--|
| WANT TO REM | OVE FROM THE | COMPANY | BOTH MGR | FELIX FERNANDI | EZ AND REDYS Y PEREZ LOPEZ |
| | | | - | | |
| | - | | | | ······································ |
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| If an amendme | ent provides for an | exchange, r | eclassification | n, or cancellation of | issued shares |
| provisions for | implementing the | amendment | if not contain | ned in the amendme | nt itself: |
| (if not app | licable, indicate N/ | 'A') | | | |
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| | 08/24/2017 | |
|---|--|---------------------------------------|
| The date of each amendment(s) | adoption: | , if other than the |
| date this document was signed. | | |
| | 3/24/2017 | |
| Effective date if applicable: | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the | s block does not meet the applicable statutory filing requirements, this date we Department of State's records. | rill not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were a by the shareholders was/were | dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval. | |
| | pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s): | |
| "The number of votes ca | 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 shareholder | |
| ☐ The amendment(s) was/were a action was not required. | dopted by the incorporators without shareholder action and shareholder | |
| DatedO | 3/24/17. | |
| sele | director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduriary by that fiduciary) | <u>.</u> |
| 170 | JOSE R PEREZ QUIROGA | |
| | (Typed or printed name of person signing) | · · · · · · · · · · · · · · · · · · · |
| | MGR | |
| | (Title of person signing) | |

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