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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: DYGE UNDERG	ROUND CABLE INC			
DOCUMENT NUMBI	ER:				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
	RICARDO ARIAS				
-	Name of Contact Person				
	DYGE UNDERGROUND INC				
_	Firm/ Company				
	5231 BUTTE STREET				
-	Address				
	LEHIGH ACRES FL 33971				
-		City/ State and Zip Code	8		
	INFO	O@SMARTUPACCOUNT	COM		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, please	se call:			
RICARDO ARIAS		at (239	8956999		
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	ortment of State:		
S35 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		Ameno Divisio Cliftor	Address Iment Section on of Corporations i Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

DYGE UNDERGROUND CABLE INC

(Name of Corporation	as currently filed with the Flo	rida Dept. of State)
P18	8000079765	
(Documen	nt Number of Corporation (if kno	own)
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	statutes, this Florida Profit Corp	oration adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	oeration:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co". A profession	"incorporated" or the abbreviation al corporation name must contain the
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDR	<u>ESS</u>)	7:1 0
C. T. A		一 一
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		5.
		21
D. If amending the registered agent and/or registered	d office address in Florida, ent	er the name of the
new registered agent and/or the new registered of	nce address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(Cny)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I de-	tered Agent:	obligations of the position
I hereby accept the appointment as registered agent. To	ат затана жин ана иссерств	oranguttonic ty use promises
Signat	ure 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, an 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 Doc 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 Doc, 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)	Title	<u>Name</u>	Address	
1) Change	VP	GYOSVANY SILVA GUERRA	5231 BUTTE ST	
X Add			LEHIGH ACRES FL 33971	
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add	_			
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
PLEASE ADD GIOSVANI SILVA GUERRA AS (VP)
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)

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	fier amendment file date)
(no more than 90 days a	per amenament fue aate)
Note: If the date inserted in this block does not meet the applicable statedocument's effective date on the Department of State's records.	tutory 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 number by the shareholders was/were sufficient for approval.	of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through vot must be separately provided for each voting group entitled to vote sep	ing groups. The following statement arately on the amendment(s):
"The number of votes cast for the amendment(s) was/were suffici	
by(voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without action was not required.	shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shall action was not required.	reholder action and shareholder
01/31/2019	
Dated	
Signature	87
(By a director, president or other officer – if of selected, by an incorporator – if in the hands appointed fiduciary by that fiduciary)	of a receiver, trustee, or other court
RICARDO	ARIAS
(Typed or printed name of	person signing)
PRESID	ENT
(Title of perso	n signing)