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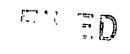
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: TELECOMUNICA	ATION INFRASTRUCTUI	RE GROUP CORP	
DOCUMENT NUMB				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this mat	ter to the following:		
	JAIR F LOPEZ MENDOZA			
	Name of Contact Person			
	Firm/ Company			
	16400 SW 304 ST APT 108			
	Address			
	HOMESTEAD FL 33033			
		City/ State and Zip Code	2	
LUIS	TASOTOLONGO@YAHOO	D.COM		
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	concerning this matter, pleas	e call:		
JAIR F LOPEZ MENDOZA		at (	217-5041	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check for	the following amount made p	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)	Certificate of Status	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton 2661 E	Address Iment Section In of Corporations Building Executive Center Circle Issee, FL 32301	

## Articles of Amendment to Articles of Incorporation of



2019 ANG 23 AM 9: 19

## TELECOMUNICATION INFRASTRUTURE GROUP CORP

( <u>Name</u> e	of Corporation as curren	ntly filed with the Florida Dept. of State)
P19000062089		2 · · · · · · · · · · · · · · · · · · ·
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	
TELECOMMUNICATION INFRASTR	UCTURE GROUP CORE	The new
	ation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		N/A
C. Enter new mailing address, if appli		N/A
(Mailing address <u>MAY BE A POST</u> )	<u>OFFICE BOX</u> )	<del></del>
D. If amending the registered agent an	d/or registered office ad	dress in Florida, enter the name of the
new registered agent and/or the new		
Name of New Registered Agent	N/A	
	(Florida :	street address)
New Registered Office Address;	N/A	. Florida
New Registered Confee Madress.		(City) (Zip Code)
New Registered Agent's Signature, if c		nt: r with and accept the obligations of the position.
r nereby accept the appointment as regist	егей адет гат јатина	r with that accept the obligations of the position.
<del></del>	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 <math>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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
(i) Change			
6) Change			
Add			
Remove			

(Attach	nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
N/A	
•	
· Ifam n	
provi	mendment provides for an exchange, reclassification, or cancellation of issued shares, sions for implementing the amendment if not contained in the amendment itself:
	f not applicable, indicate N/A)
√A	

	08/14/2019	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
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 D	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statemen each voting group entitled to vote separately on the amendment(s):	t
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
08/13/201 Dated Signature	en J. dokente.	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court ated fiduciary by that fiduciary)	
	JAIR F LOPEZ MENDOZA	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	

and the second