Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top

(((H20000018225 3)))

and bottom of all pages of the document.

H200000182753ABQJ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Terr

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : JP GLOBAL BUSINESS

Account Number : 120130000093 Phone

: (305)359-3700

Fax Number

: (786)217-1243

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN DECO & ART FL CA CORP

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$35.00 |

Electronic Filing Menu-

Corporate Filing Menu

Неф

TO: Amendment Section

2

COVER LETTER

| Division of Corporations | | | |
|--|---|--|---|
| NAME OF CORPORATIO | N: DECO & ART FL | CA CORP | |
| DOCUMENT NUMBER: P | 13000063682 | | |
| The enclosed Articles of Ame | | bmitted for filing. | |
| Please return all corresponder | | | |
| Troube rolland and overlap on the | | | |
| SONIA | BOTERO | | |
| | | Name of Contact Perso | ń |
| JP GLO | DBAL BUSINESS SC | LUTIONS INC | |
| | | Firm/ Company | |
| 1395 B | RICKELL AVE STE | 1380 | |
| | | Address | |
| MIAM | I, FL 33131 | | |
| | | City/ State and Zip Cod | e |
| MAST | ER@JPGBUSINESS. | СОМ | |
| —————————————————————————————————————— | mail address: (to be u | sed for future annual report | notification) |
| | | · | |
| For further information conce | rning this matter, plea | se call: | |
| SONIA BOTERO | | at (305 | 359 3700 |
| Name of Conta | act Person | Area Co |) 359 3700 de & Daytime Telephone Number |
| Enclosed is a check for the fol | llowing amount made | payable to the Florida Dep | artment of State: |
| _ | \$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | Cs52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address Street Address | | | |
| Amendment Section Division of Corporations | | Amendment Section Division of Corporations | |
| P.O. Box 6327 | | The Centre of Tallahassee | |
| Tallahassee, | FL 32314 | | N. Monroe Street, Suite 810 |
| Division of P.O. Box 63 | Corporations 27 | Divisio The Co 2415 N | on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 |

3

Articles of Amendment to Articles of Incorporation ٥ſ

| DECO & ART FL CA CORP | |
|---|---|
| (Name of Corporation as currently filed w | with the Florida Dept. of State: |
| P13000063682 | |
| (Document Number of Corpor | ation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> its Articles of Incorporation: | Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| O.F. GROUP CORP | The new |
| name must be distinguishable and contain the word "corporation," "company "Inc.," or Co.," or the designation "Carp," "Inc." or "Co". A profess "chartered," "professional association," or the abbreviation "P. 4" | "," or 'incorporated' or the abbreviation "Corp " |
| B. Enter new principal office address, if applicable: | |
| (Principal office address MUST BE A STREET ADDRESS) | |
| - | , |
| C. Enter new mailing address, if applicable: | 20 20 |
| (Mailing address MAY BE A POST OFFICE BOX) | |
| | |
| - | |
| | |
| D. If amending the registered agent and/or registered office address in Finew registered agent and/or the new registered office address: | lorida, enter the name of the |
| ······································ | 3 |
| Name of New Registered Agent | |
| | |
| (Florida street addres | <i>u)</i> |
| New Registered Office Address: (City) | , Florida |
| (Cny) | (/ir Code) |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent—I am familiar with and a | accept the obligations of the position |
| Signature of New Registered | Agent, if changing |
| Check if applicable | , b. 6 |
| The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S. | |

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

Page:

Example:

4

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:

President: Y 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>Joh</u> | nn Doe | | |
|-------------------------------|----------------------|----------|-----------------|----------|
| X Remove | <u>V</u> <u>Mil</u> | ke Jones | | |
| X Add | <u>SV Sal</u> | ly Smith | | |
| Type of Action (Check One) | Title | Name | <u>Addres</u> s | |
| 1) _Change | - | | | |
| Add | | | | |
| Remove | | | | |
| 2) Change | ************ | | 50 | 20 |
| Add | | | | ± 77 |
| Remove 3) Change | | | | 2 |
| Add | | | 17 | |
| Remove | | | 至天 | <u>ω</u> |
| 4) Change | | | GD = | 7 |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
| Add | | | | |
| , Remove | | | | |
| ර) Change | | | | |
| Add | | | | |
| Remove | | | | |

| Attach additional sheets, if necessary). (Be specific) | | |
|--|--|----------|
| | | |
| Not assessed to a second to the second to th | | |
| | | |
| A SECRETARY OF THE PROPERTY OF | | |
| | | |
| The second state of the second | | |
| | | |
| | | |
| | | |
| | | |
| a properties and a supplied and a su | | |
| | | |
| | ······································ | . |
| | | |
| | | - |
| | | |
| | | - |
| | | |
| | | |
| | | — |
| | | |
| | | |
| | <u></u> | |
| | - (: | |
| · to the second | II | |
| | - - | : |
| | | |
| | 1,. | |
| | | - |
| an amendment provides for an exchange, reclassification, or cancellation of issued shares, | - 1 · | Ç |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N A) | 구기 | (|
| (A not abbuttance to M) | AND TO | - |
| | GD . | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | *** | |
| | | |
| | *** | |
| | *** | |
| | | - |

| | 01 16/2020 | , if other than the |
|--|--|---|
| The date of each amendment(date this document was signed. | | , , , , , , , , , , , , , , , , , |
| Effective date if applicable: | (no more than 90 days after amendment file date) | |
| | (no more than 50 days after amenament five date) | |
| Note: If the date inserted in the document's effective date on the | is block does not meet the applicable statutory filing requirements, this date. Department of State's records. | de will not be fisted as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ■ The amendment(s) was/were by the shareholders was/were | adopted by the shareholders. The number of votes cast for the amendment(e sufficient for approval. | s) |
| | approved by the shareholders through voting groups. The following statems for each voting group entitled to vote separately on the amendment(s). | eni |
| "The number of votes | ast for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| sel | 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 cours ointed fiduciary by that fiduciary) | |
| | ALBERTO J OXFORD | |
| | (Typed or printed name of person signing) | *************************************** |
| | VP | |
| | (Title of person signing) | |
| | | 57.00 |
| | | 20 _. |
| | | The second second |
| | | 2 = |
| | | - 77 |
| | | MIZI AMO |
| | | FILED MAN 21 AM 10: 37 MANSSEY MASSES |
| | | GD 22 |