P15000031854

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: MIAMI MASCA	AGNI CORP.			
DOCUMENT NU	P15000031854				
The enclosed Articl	les of Amendment and fee are su	bmitted for filing.			
Please return all cor	rrespondence concerning this mat	tter to the following:			
		Name of Contact Person	n		
	MIAMI MASCAGNI CO	JRP.			
	1680 MICHIGAN AVE	Firm/ Company STE 700			
	MIAMI BEACH FL 331	Address 39			
		City/ State and Zip Cod	e		
Al	DM.DEPT.MN@GMAIL.C	ОМ			
	E-mail address: (to be us	ed for future annual report	notification) .		
For further informa	tion concerning this matter, pleas	e call:		11.5	را 150
CLAUDIO NO		305 at (7772268)		5 112 -5
Nan	ne 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:		I
■ \$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)		ယ္ က က

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 of

MIAMI MASCAGNI CORP.			
(Name of Corporation as currently filed with the Florida Dept. of State) P15000031854			
(Document Number of Corporation (if known)			
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	3 ameno	lment(s)	to
A. If amending name, enter the new name of the corporation:			
	_The		
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the al "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must cword "chartered," "professional association," or the abbreviation "P.A."	obrevia :ontain	tion the	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	,		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
	-4 (2) 	G	
		<u>۔۔۔</u>	/1
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:		J	
Name of New Registered Agent		~O	
	· .	ట్టు	
(Florida street address)	÷.,,	ST.	
New Registered Office Address:, Florida			
(City) (Zip Code)			
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.			
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>	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) Change	PST	ANDREA MASCAGNI	1680 MICHIGAN AVE
Add			STE 700
Remove			MIAMI BEACH FL 33139
2) Change	PST	UMBERTO MASCAGNI	1680 MICHIGAN AVE
Add			STE 700
Remove			MIAMI BEACH FL 33139
3) Change	VP	ANDREA MASCAGNI	1680 MICHIGAN AVE
Add			STE 700
Remove			MIAMI BEACH FL 33139
4) Change		·	
Add			
Remove			
5) Change			···
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necess	al Articles, ente sary). (Be spec	cific)	_		
				· · · · · · · · · · · · · · · · · · ·	
		. <u>. </u>			
					
an amendment provides for ar	n exchange, rec	lassification, o	r cancellation of	f issued shares,	
rovisions for implementing the (if not applicable, indicate N	<u>e amendment il</u> //A)	not contained	in the amendm	ent itself:	
(3	,				
			····		
				-	

The date of each amendment(s) adoption date this document was signed.	n:	, if otl	her than the
Effective date if applicable:		_	
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the amendment(s) t for approval.		
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):		
	amendment(s) was/were sufficient for approval		
by	(voting group)		
The amendment(s) was/were adopted by action was not required.	y the board of directors without shareholder action and shareholder		
The amendment(s) was/were adopted b action was not required.	y the incorporators without shareholder action and shareholder		
Dated04/23/2	1015		
Signature			
selected, by a	, president of other officer — if directors or officers have not been n incorporator — if in the hands of a receiver, trustee, or other court uctary by that fiduciary)	三名	ភ៌ា
AND	PREA MASCAGNI		5 <u> </u>
	(Typed or printed name of person signing)	·····	ا ن ان
SOL	E DIRECTOR	•	
	(Title of person signing)	 ;	ن نب