## P160000 94348

(Requestor's Name)  (Address)	
(Address)	4003
(City/State/Zip/Phone #)	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: First Hospitality M	lanagement Group Inc.	
DOCUMENT NUM	BER: P16000094348		
The enclosed Articles	s of Amendment and fee are su	ibmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Hector Antunez		
	71-10-10-1	Name of Contact Person	n
	First Hospitality Managemer	nt Group Inc.	
	<u> </u>	Firm/ Company	
	848 Brickell Ave Suite 617		
		Address	
	Miami, FL 33131		
		City/ State and Zip Cod	e
fīnsc	olcorp@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Hector Antunez		at ( 305	979-1853
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or 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)
	iling Address endment Section		Address ment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## Articles of Amendment to Articles of Incorporation

First Hospitality Management Group Inc

(Name of Corporation as currently)

(Name of Corporation as current	ly filed with the Florida Dept. of State)
P16000094348	,
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following an
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must cont
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)	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent	
<del></del>	
(Florida str	eet address)
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 to	
r nor ety decept the appointment as registered agent. I am juminar	жин ана иссері те обиданот ој те розиют.
Signature of New Is	Registered Agent, if changing

address of each Officer's (Attach additional sheets, Please note the officer/dir P = President; V = Vice I Executive Officer; CFO = held. President, Treasurer Changes should be noted	and/or D if necess rector titl President = Chief I r, Directo in the fo ves the c	sary) le by the first letter of the office title: t; T= Treasurer; S= Secretary; D= Director; TR= Financial Officer. If an officer/director holds modor would be PTD. llowing manner. Currently John Doe is listed as tearporation, Sally Smith is named the V and S. The	= Trustee: C = Chairman or Clerk, re than one title, list the first letter he PST and Mike Jones is listed as
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	P	Mejia , Marlon B	848 Brickell Avenue
Add			Suite No. 617
X Remove V			Miami, FL 33131
2) Change			
Add			
Remove			
3 ) Change	P	Mauricio Villafanez	848 Brickell Ave
X Add			Suite 617
Remove			Miami, FL 33131
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary). (Be specific)	
	<del></del>
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)	<u>.</u>

•	09/23/2019	İ
The date of each amendment(s) a	doption:	. i
date this document was signed.		
	23/2019	
Effective date <u>if applicable</u> :		 
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	   not
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) ufficient for approval.	
•	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	·	
· · · · · · · · · · · · · · · · · · ·	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	
Septembe Dated	er 23rd, 2019	
Signature	1/2-C	
selecte	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 nted fiduciary by that fiduciary)	
	Hector Antunez	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	Ī