591664

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	DRATION: M.C.M. CORP.			
DOCUMENT NUM	59-1860872			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	ROBERT RAGUSA			
	Name of Contact Person			
	M.C.M. CORP.			
		Firm/ Company		
1741 COLLINS AVENUE				
Address				
	MIAMI BEACH, FL 33139			
		City/ State and Zip Cod	e	
RO	BERTR@GOMIAMIBEACH.G	СОМ		3
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		08 225 21
ROBERT RAGUSA		at (305	503-1435	(D) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C
Name	Name of Contact Person Area Code & Daytime Telephone Number		de & Daytime Telephone Number	න
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	Ď
\$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)	
At Di P.	ailing Address mendment Section vision of Corporations O. Box 6327 illahassee, FL 32314	Ameno Divisio Cliftor	Address Iment Section on of Corporations Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

to

M.C.M. CORP.				
(Name of Corporation	on as currently fi	<u>led with the Florida D</u>	ept. of State)	
591664				
(Docum	nent Number of Co	orporation (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this <i>Flo</i>	rida Profit Corporation	adopts the follo	wing amendment(s)
A. If amending name, enter the new name of the co	rporation:			
				The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the contains the contai	" "Inc," or "Co	". A professional corp	rporated" or th oration name m	e abbreviation
B. Enter new principal office address, if applicables	<u>:</u> .	•		
(Principal office address MUST BE A STREET ADD	ORESS)			말
	-			01V1310# 07 15
	-			
C. Enter new mailing address, if applicable:	ě			<u>ري</u> -
(Mailing address MAY BE A POST OFFICE BO)	<u>X</u>) .	. <u>_</u>		<u> </u>
	_			a to the second
				ڡؚ
	-			
D. If amending the registered agent and/or register		in Florida, enter the n	name of the	
new registered agent and/or the new registered of	office address:			
Name of New Registered Agent				
-	(Florida street	address)		
New Registered Office Address:			, Florida	
	(Ci.	ty)	(Zip Code)
N. o. D I. a. a. M. Olavaria . If about . D				
New Registered Agent's Signature, if changing Regiliary I hereby accept the appointment as registered agent.		and accept the obligati	ions of the positi	on.
	•		•	
	A			
Sign	atura of New Real	stared Agent if changin	TO T	

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> <u>John</u>	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	STD	ENRIQUE CHEDIAK	1741 COLLINS AVENUE
Add			MIAMI BEACH, FL 33139
X Remove			
2) Change	\checkmark	ENRIQUE CHEDIAK, JR.	1741 COLLINS AVENUE
X Add			MIAMI BEACH, FL 33139
Remove			
3) Change	-		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add		•	
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)	
f an amendment provides for an exc	change, reclassification, or cancella	ation of issued shares,
provisions for implementing the am (if not applicable, indicate N/A)	endment if not contained in the an	<u>aendment itself:</u>
		·

The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file 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 dat Department of State's records.	e will not be listed 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(s sufficient for approval.)
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated X	5/24/17 Klogel Mandell	
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	LLOYD MANDELL	
	(Typed or printed name of person signing)	
	STD	
	(Title of person signing)	