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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: M.R.J. ENTI	ERPRISES, INC.
DOCUMENT NUMBER:	19758
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning t	his matter to the following:
SANDRA RUTHERF	ORD
M.R.J. ENTERPRISE	Name of Contact Person S, INC.
	Firm/ Company
593 ANNA AVE.	· · · · · · · · · · · · · · · · · · ·
SEBRING, FL 33875	Address.
	City/ State and Zip Code
	·
whitewoodcove@yahoo.com	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter	, please call:
PHILIP RUTHERFORD	863 385-9134
Name of Contact Person	Area Code & Daytime Telephone Number
enclosed is a check for the following amount r	nade payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Fe Certificate of Sta	e & \$\sumsymbol{\sumsy
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

M.R.J.	ENT	ERPR	ISES,	INC.
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		ì
(Name of Corpor	ation as currently filed with the Florida Dept. of State)	-
G19758		
(Doc	cument Number of Corporation (if known)	`
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this Florida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the	corporation:	
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Cow word "chartered," "professional association," or the	word "corporation," "company," or "incorporated" or the action," "Inc," or "Co". A professional corporation name must the abbreviation "P.A."	_The new bbreviation contain the
B. Enter new principal office address, if applicat	61	
(Principal office address MUST BE A STREET AL	DDRESS)	
		7 55
		宣 [12]
C. Enter new mailing address, if applicable:		7 335
(Mailing address MAY BE A POST OFFICE B	<u></u>	
	-	
		
		D. S. C.
). If amending the registered areas - 1/		1
new registered agent and/or the new registered	tered office address in Florida, enter the name of the	1
	d office address.	1
Name of New Registered Agent		
	(Florida street address)	1
Non Paristand Con	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	(City) , Florida	
	(Zip C	'ode)
New Registered Agent's Signature, if changing Re	printound A	
hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.	
	Jacob inc obligations of the position.	}
		i
Sign	nature of New Registered Agent, if changing	
- 0	J. T. T. S.	

address of each Officer a (Attach additional sheets, Please note the officer/dir P = President; V = Vice I Executive Officer; CFO = held. President, Treasurer Changes should be noted a change, Mike Jones lead Mike Jones, V as Remove,	and/or Di if necessor ector title President, Chief F Directo in the fol- ves the co	irector be ary) 2 by the fil 3 T= Trea inancial 6 or would be lowing morporation	rst letter of the office title; surer; S= Secretary; D= Director; Sofficer. If an officer/director holds we PTD. anner. Currently John Doe is listed a standard Sofficer.	fficer/director being removed and title TR = Trustee; C = Chairman or Clerk; of more than one title, list the first letter of as the PST and Mike Jones is listed as the These should be noted as John Doe, PT	CEO = Chief If each office e V. There is
Example: X Change	<u>PT</u>	John Do	<u>c</u>		
X Remove	<u>V</u>	Mike Joi	nes		
_X Add	<u>SV</u>	Sally Sn	nith		
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s	
X Change	PVPST	_	PHILIP C. RUTHERFORD	593 ANNA AVE	
Add		-		SEBRING, FL	
Remove				3387	
2) Change	VP	_	PHILIP C. RUTHERFORD	593 ANNA AVE.	
Add				SEBRING, FL	
X Remove				33875	
3) Change	S		PHILIP C. RUTHERFORD	593 ANNA AVE.	
Add		_		SEBRING, FL	1
X Remove				33875	
4) Change	Т		PHILIP C. RUTHERFORD	593 ANNA AVE.	
Add		_		SEBRING, FL	
X Remove				33875	$\overline{\perp}$
5) Change		_		_	1
Add				- <u></u>	
Remove					+
6) Change		_			
Add					

Remove

цасп ааашола	l sheets, if necessary). (Be specifi	c)			
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an amendmer	nt provides for an ev	change, reclas	ssification, or c	ancellation of i	ssued shares.	
rovisions for i	implementing the ar	<u>mendment if no</u>	ot contained in	the amendmen	t itself:	
(if not appli	icable, indicate N/A)					
						<u> </u>
						•
	·					
		· · ·				

	AUGUST 22, 2017	
The date of each amendment(s):	adoption:	, if other than the
date this document was signed.		l
Effective date <u>if applicable</u> :		t
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the f	block does not meet the applicable statutory filing requirements, this date we bepartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each 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	<u> </u>
by	(voting group)	ļ
,	(voting group)	
☐ The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	lopted by the incorporators without shareholder action and shareholder	1
AUGUST Dated	22, 2017	
(By a 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 need fiduciary by that fiduciary)	
	PHILIP C. RUTHERFORD	
	(Typed or printed name of person signing)	
	PRESIDENT	į
	(Title of person signing)	1