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| Special Instructions to I | Eiling Officer: | |
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Office Use Only



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COVER LETTER

TO: Amendment Section

Division of Corporations

| NAME OF CORPOR | ATION: Magesco, Inc. | | |
|--|---|--|--|
| DOCUMENT NUMB | | | |
| | of Amendment and fee are su | ibmitted for filing. | |
| Please return all corres | pondence concerning this ma | itter to the following: | |
| | Marc Gauthier | | |
| • | | Name of Contact Person | n |
| | Magesco, Inc. | | |
| | · · · · · · · · · · · · · · · · · · · | Firm/ Company | |
| | 19 West Flagler Street, Suite | • • | |
| | | Address | |
| | NATE OF THE 213 - 2212A | Aduress | |
| - | Miami, Florida 33130 | | |
| | | City/ State and Zip Cod | c |
| marce | authier@magesco.com | | |
| | | sed for future annual report | notification) |
| | | | |
| For further information | concerning this matter, pleas | se call: | |
| Marc Gauthier | | at (| 970-9316 |
| Name o | f Contact Person | Area Code & Daytime Telephone Number | |
| Enclosed is a check for | 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) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahussee, FL 32314 | | Street Address Amendment Section Division of Corporations Clifton Building | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



| (Name of Corporation as current | | | |
|---|--|--|--|
| \ <u>\</u> | tly filed with the Florida Dept. of State) | | |
| 58025 | | | |
| (Document Number of | of Corporation (if known) | | |
| tursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation: | | | |
| . If amending name, enter the new name of the corporation: | | | |
| N/A | The new | | |
| ame 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 | on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the | | |
| B. Enter new principal office address, if applicable: | 19 West Flagler Street, Suite 210 | | |
| Principal office address <u>MUST BE A STREET ADDRESS</u>) | Miami, Florida 33130 | | |
| | | | |
| Enter new mailing address, if applicable: | 19 West Flagler Street, Suite 210 | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | Miamki, Florida 33130 | | |
| | Miamki, Florida 33130 | | |
| (Mailing address MAY BE A POST OFFICE BOX) 1. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres | Miamki, Florida 33130 Aress in Florida, enter the name of the | | |
| . If amending the registered agent and/or registered office add | Miamki, Florida 33130 Aress in Florida, enter the name of the | | |
| . If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres | Miamki, Florida 33130 Aress in Florida, enter the name of the | | |
| . If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres NA Name of New Registered Agent | Miamki, Florida 33130 Aress in Florida, enter the name of the | | |
| . If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres NA Name of New Registered Agent | Miamki, Florida 33130 dress in Florida, enter the name of the is: | | |

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name 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 = Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each 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. The 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 Che Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| Example: 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) | Title | Name | <u>Addres</u> s |
| 1) X Change | P/CEO | Marc Gauthier | 5815 SW 146th |
| Add | | | Miami, Florida 33183 |
| Remove | | | |
| 2) Change | CEO | Rilck Noel | 3090 Pacific Way |
| Add | | | Miramar, Florida 33029 |
| X Remove | | | |
| 3) X Change | sv | Jennifer Gauthier | 315 Lawton Street, SW |
| Add | | | Atlanta, Georgia 30310 |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | ······································ | |
| Add | | | |
| Remove | | | |

| /A | ional sheets, if nece | moury. (De apecy) | , | | |
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| | ment provides for | an exchange, recla | ssification, or canc | ellation of issued sha | res. |
| If an amend | | the amendment if n | ot contained in the | amendment itself; | |
| provisions : | <u>for implementing t</u> | | | | |
| provisions (if not a | for implementing t upplicable, indicate | ' N/A) | | | |
| provisions : (if not a | for implementing (upplicable, indicate | · N/A) | | | |
| provisions : (if not a | for implementing (upplicable, indicate | · N/A) | | · - | |
| provisions (if not a | for implementing (upplicable, indicate | | | | |
| provisions (if not a | for implementing (upplicable, indicate | · N/A) | | | |
| provisions (if not a | for implementing (upplicable, indicate | - N/A) | | | |
| provisions (if not a | for implementing (upplicable, indicate | N/A) | | | |
| provisions (if not a | for implementing (upplicable, indicate | N/A) | | | |
| <u>provisions</u> | for implementing (upplicable, indicate | · N/A) | | | |
| provisions (if not a | for implementing (upplicable, indicate | (N/A) | | | |

| | September 2, 2020 | |
|--|--|------------------------|
| The date of each amendment(s) | adoption: | , if other the |
| date this document was signed. N/ | Α | |
| Effective date if applicable: | A | |
| | (no more than 9t) days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the I | block does not meet the applicable statutory filing requirements, this date | ate will not be listed |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were ac by the shareholders was/were | dopted by the shareholders. The number of votes cast for the amendment(sufficient for approval. | s) |
| | oproved by the shareholders through voting groups. The following statemor each voting group entitled to vote separately on the amendment(s): | ent |
| "The number of votes case | st for the amendment(s) was/were sufficient for approval | |
| by | ·· | |
| | (voting group) | |
| action was not required. | dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder | er |
| Septembe | or 3,-2020 | |
| Dated | March Million | |
| (By 9 | director, president of other officer - if directors or officers have not been | |
| | ted, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary) | rt |
| | Marc Gauthier | |
| | (Typed or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |
| | | |