## N09000011194

•	(Requestor's Name)	
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	(City/State/Zip/Phone #	)
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPO	RATION: MIQMI	Loveing Miam	1 INC.		
DOCUMENT NUMBER: NO900011194					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Walter Sutton Jr					
		Contact Person)			
(Firm/ Company)					
103 NW 202 Terr #708 (Address)					
(Address)					
MIAIII Gardens, Fl. 33169 (City/State and Zip Code)					
Salutevetsnow@AOL.COM					
	E-mail address: (to be use	ed for future annual report notific	ation)		
For further information	on concerning this matter, pleas	e call:			
Walter S	button Jr of Contact Person)	at (305) 725	5 7262 me Telephone Number)		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$ <sup>&lt;</sup> ? ·		
	ing Address ndment Section	Street Addr. Amendment S			

Division of Co.

Clifton Building 2661 Executive C

Tallahassee, FL 3.

## **Articles of Amendment**

to
Articles of Incorporation
of .

- Miami Loveing Miami INC
(Name of Corporation as currently filed with the Florida Dept. of State)
N09000011194
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Nois For Profit Corporation</i> adopt the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Miami Loving Miami Iwc.
The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.
B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address if applicable:
C. Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)
N / A SE S
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:
Name of New Registered Agent:
Name of New Registered Agent.
New Registered Office Address: (Florida street address)
N/A , 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.
<i>W</i>  A
Signature of New Registered Agent, if changing
Page 1 of 3
No. a de la

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)

<u>Title</u>	Name	<u>Address</u>	Type of Action
			☐ Add ☐ Remove
	A		
			Add Remove
E. If amer (attach d	nding or adding additional Articles, endditional sheets, if necessary). (Be see Further Entri	pecific)	
		/	

The date of each amendment(s) adoption: Jan. 7, 2010
Effective date if applicable: (date of adoption is required)
(no more thah 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated Jan 7. 2010
Signature Walter Sutton h.
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, of other court appointed fiduciary by that fiduciary)
Watter Sutton Jr (Typed or printed name of person signing)
President
(Title of person signing)