Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H160002669173)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : 12000000146

Phone : (305)444-4994

: (305)444~4977

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Address:		
	Address:	Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN MILLENIUM GROUP INVESTMENTS, INC.

Certificate of Status 0 Certified Copy Page Count 05 Estimated Charge \$35.00

Electronic Filing Menu

Corporate Filing Menu

ᇙ

Articles of Amendment to Articles of Incorporation of

Ţ	(ب		AILLENIUM GROUP INVESTMENTS, INC.
	256	ed with the Florida Dept. of State)	(Name of Corporation as currently fi
			0000085660
		poration (if known)	(Document Number of Co
nt(s)	iendment	Ida Profit Corporation adopts the following amend	ursuant to the provisions of section 607.1006, Florida Statutes, this Florida Articles of Incorporation:
			If amending name, enter the new name of the corporation:
	viation	"company," or "incorporated" or the abbrevia A professional corporation name must contain	ame must be distinguishable and contain the word "corporation," Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co ord "chartered," "professional association," or the abbreviation "P.A
			Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS .
			Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
		n Florida, enter the name of the	. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:
			Name of New Registered Agent
		ddress)	(Florida street
		Florida	New Recristered Office Address
)		(Ci
		and accept the obligations of the position.	ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I amfaniliar with
	,	Florida, Florida	(Florida street of Now Registered Office Address: (Cite of Registered Agent's Signature, if changing Registered Agent:

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.

<u>X</u>	Change	<u>PT</u>	John Doe	
X	Remove	<u>v</u>	Mike Jones	
<u>x</u>	Add	<u>sv</u>	Sally Smith	
Tyr (Ch	ne of Action neck One)	<u>Title</u>	Name	<u>Addres</u> s
1)	Change	VP/S	ELBITA ALFONSO	7025 NW 41 ST
:	XX Add			MIAMI, FL 33166
-	Remove			
2) .	Change			
-	Add		•	
-	Remove			
3)	Change			
_	Add			
-	Remove			
4) .	Change			
_	Add			
-	Remove			
5)_	Change	•	_	
_	Add			
-	Remove			
රා _	Change		_	
_	Add			
_	Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	The state of the s
•	
	• • • • • • • • • • • • • • • • • • •
•	
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, indment if not contained in the amendment itself:

	10/27/2016	
The date of each amendment(s) a	doption:	_, if other than th
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	slock does not meet the applicable statutory filing requirements, this date will epartment of State's records.	not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) efficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	ņ	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
10/27/2016 Dated		_
(By a d	irector president or other officer - if directors or officers have not been	_
	d, by an incorporator — if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
appoin	ed induciary by diar induciary)	
,	YOSVANI ALFONSO	
	(Typed or printed name of person signing)	
•	PVPS	
	(Title of person signing)	