# P03000035142

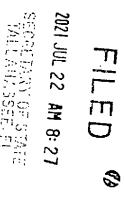
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# COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:AMDG INVESTMEN	T CORPORATION
DOCUMENT NUMBER: P03000035142	
The enclosed Articles of Amendment and fee are submit	ed for filing.
Please return all correspondence concerning this matter to	the following:
STEVEN M. LEE	
N.	ame of Contact Person
STEVEN M. LEE, PA	
	Firm/ Company
1000 BRICKELL AVENUE, SUI	FE 705
	Address
MIAMI, FL 33131	
Ci	ty/ State and Zip Code
steven@stevenleelaw.com	
E-mail address; (to be used for	r future annual report notification)
For further information concerning this matter, please cal STEVEN M. I.EE	
Name of Contact Person	at (305 ) 856-7855  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payab	•
Certificate of Status (/	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Additional copy is Certified Copy Inclosed) (Additional Copy Is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

#### Articles of Amendment to Articles of Incorporation of

## AMDG INVESTMENT CORPORATION

(Name of Corporation as cu	rrently filed with the Flor	ida Dept. of State)	
	P03000035142		
(Document Nur	nber of Corporation (if know	wn)	
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	s, this Florida Profit Corpo	ration adopts the follo	owing amendment(s)
A. If amending name, enter the new name of the corporati	on:		
name must be distinguishable and contain the word "corporation" Inc.," or Co.," or the designation "Corp," "Inc.," or "Corporation" chartered, "professional association," or the abbreviation	o". A professional corpo	porated" or the abbreveration name must co	The new viation "Corp.," ntain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			2021 JUL 212 SECONDAY S
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac	<u>e address in Florida, enter</u> Idress:	the name of the	第二章 万
Name of New Registered Agent		s	1 8:27
(Flo)	ida street address)		
New Registered Office Address:		, Florida	
	(City)		Zip Code)
New Registered Agent's Signature, if changing Registered .  I hereby accept the appointment as registered agent. I am fan  Signature of	Agent: siliar with and accept the obvious  New Registered Agent, if ch		on.

Check if applicable  $\Box$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Add

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.

### Example: X Change PT John Doe X Remove $\underline{V}$ Mike Jones \_X Add <u>SV</u> Sally Smith Type of Action Title Name <u>Address</u> (Check One) VP JESUS TRUJILLO 14480 SW 216 STREET 1) \_\_\_\_ Change MIAMI, FL 33170 Add Remove ANDRES ALBERTO GONZALEZ 13375 SW 127 AVENUE 2) \_\_\_\_ Change MIAMI, FL 33186 Add Remove 3) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove 4) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove 5) \_\_\_\_ Change \_\_\_\_ Add Remove 6) \_\_\_\_ Change

(Attach additional sheets, if necessary).	(Be specific)
<u> </u>	10
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If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(y noi appacame, maicine (viA)	

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The date of each amendment(s) date this document was signed.	adoption:, if other than the
Effective date if applicable:	
	(no more than 90 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 will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were as by the shareholders was/were	lopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.
must be separately provided fo	oproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
	t for the amendment(s) was/were sufficient for approval
by	(voting group)
JULY 1 Dated Signature	5, 2021
<sup>7</sup> (By a `select	irector, president-or officer – if directors or officers have not been ed; by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary)
	JOEL AMARO
	(Typed or printed name of person signing)
	PERSIDENT
	(Title of person signing)