# P0500051067

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#### **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	N: A & M SUPPO	ORT INC				
DOCUMENT NUMBER: _	P05000051067	-				
The enclosed Articles of Amer	ndment and fee are su	bmitted for filing.				
Please return all corresponden	ce concerning this ma	tter to the following:				
	BI	ERNARDO L GONZALEZ				
	Name of Contact Person			_		
<del></del> -	Firm/ Company					
	1500 WESTON ROAD, SUITE 200					
Address			_			
WESTON, FLORIDA, 33326						
	City/ State and Zip Code					
	BERLU	GO69@GMAIL.COM				
E-	mail address: (to be us	sed for future annual report r	notification)			
For further information concer				SECIKET	16 JUL 21 PH 2:	
BERNARDO L GONZALE		at (	_) <u>6553</u> 169		2	[
Name of Conta	ct Person	Area Cod	le & Daytime Telephone Num	nber 🏋	7	
Enclosed is a check for the fol	lowing amount made	payable to the Florida Depar	tment of State:		S S	C
	\$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)		٥	
Mailing Ad Amendment Division of P.O. Box 63 Tallahassee	Section Corporations 27	Division Clifton 2661 Ex	Address ment Section n of Corporations Building recutive Center Circle ssee, FL 32301			

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

#### A & M SUPPORT GROUP INC

### (Name of Corporation as currently filed with the Florida Dept. of State) P05000051067 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) C. Enter new mailing address, if applicable: 1500 WESTON ROAD, SUITE 200 (Mailing address MAY BE A POST OFFICE BOX) WESTON, FLORIDA 33326 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: BERNARDO L GONZALEZ Name of New Registered Agent 1500 WESTON ROAD, SUTTE 200 (Florida street address) 33326 WESTON Florida New Registered Office Address: (Zip Code) (City) 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.

Signature of New Registered Agent, if changing

## 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.

Example: X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1)Change	DP	PEDRO PINI	10242 NW 47TH ST # 37
Add			SUNRISE, FLORIDA
X Remove			33351
2) Change	P	LEONARDO SANTILLI	14227 SW 97 TERRACE
X Add			MIAMI, FLORIDA
Remove			33186
3)Change	VP	DANIEL SANTILLI	14227 SW 97 TERRACE
X Add			MIAMI, FLORIDA
Remove			33186
4) Change			
Add			
Remove			
5) Change			<u> </u>
Add			
Remove			
6) Change			_
Add			
Remove			

	(Be specific)
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f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an incident in the amendment itself:

The date of each amendment(s) adopt date this document was signed.	tion:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this blocdocument's effective date on the Depart	k does not meet the applicable statutory filing requirements tment of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders was/were suffice.	d by the shareholders. The number of votes cast for the amerient for approval.	ndment(s)
	ed by the shareholders through voting groups. The following h voting group entitled to vote separately on the amendment	
	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.  The amendment(s) was/were adopte action was not required.  07/01/2016	d by the incorporators without shareholder action and shareho	older
Dated		
- V		
selected, t	tor, president or other officer – if directors or officers have n y an incorporator – if in the hands of a receiver, trustee, or ot fiduciary by that fiduciary)	
	PEDRO PINI	
	(Typed or printed name of person signing)	
	DP	
	(Title of person signing)	16 JUL 21 PM 2:59 SECRETARY OF SHOWING