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C. GOLDEN AUG 11 2017

COVER LETTER

TO: Amendment Section

Division of Corporations					
NAME OF CORPORATION: M&RLimo, Inc					
DOCUMENT NUMBER: P050 00051537					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Rimma Tetelboim					
MaR Contact Person					
22186 Clack low Den Day					
Boro Righon F1 33428					
City/ State and Zip Code					
Kimma@MandRlimo.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Rimma Tetelboim at 561 404-3176 Name of Contact Person Area Code & Daytime Telephone Number					
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)					
Mailing Address Amendment Section Street Address Amendment Section					
Division of Corporations Division of Corporations					
P.O. Box 6327 Clifton Building					

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to Articles of Incorporation

FILED

Articles of incorporation	, ,
M&RLimo, Inc	2017 AUG - 7 PM 1: 26
(Name of Corporation as currently filed with the	he Florida Dept. of State) : A Ur DIALL
405000051537	TALLATIASSEE, FLORIDA
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit</i> is Articles of Incorporation:	t Corporation adopts the following amendment(s)
Some Ms Liwo, ame must be distinguishable and contain the word "corporation," "company "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A profession	v," or "incorporated" or the abbreviation
vord "chartered," "professional association," or the abbreviation "P.A."	
3. 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)	
D. If amending the registered agent and/or registered office address in Florida new registered agent and/or the new registered office address: Name of New Registered Agent	a, enter the name of the
23.186 CfOCK OWX Morida street address) New Registered Office Address: BOCO FORD (City)	<u>CR UDY</u> , Florida 33428 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept	ot 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	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One) 1) Change Add Remove	Pimma Tete	Address (boim 22186 Claritoper Bocelatar, FR3348
2) Change Add Remove 3) Change Add Remove	P Maex Tetelboir	n same.
4) Change Add Remove		
5) Change Add Remove		
6) Change Add Remove		

Attach additional sheets, if necessary).	(Be specific)	
		•
16	hanna a la nife a d'an anna an lladina a filiana da la na	
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		

The date of each amendment(s) adoption: 7/31/17	_, if other than the
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 block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder	
action was not required.	
7/3/17	
Dated The Control of	
Signature + (1)	
(By a dilector, president or other officer - if directors or officers have not been	_
selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Kimma letelborn	
(Typed or printed name of person signing)	
owner PKES.	
(Title of person signing)	