## PU600044117

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: M & Z HOLDING	GS, INC.	
DOCUMENT NUMI			
	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	MICHAEL H. HIRSCH, ES	Q.	1
		Name of Contact Person	1
	MICHAEL H. HIRSCH, P.A	۷.	
		Firm/ Company	
	650 SE 3RD AVE		
		Address	
	FORT LAUDERDALE, FL	33301	
	<del></del>	City/ State and Zip Code	·
rickw	est101@comcast.net / mhh@	mhirschlaw.com	/
<del></del>	• •	sed for future annual report	notification)
For further information  Michael H. Hirsch	n concerning this matter, pleas		, 462-7393
Name o	of Contact Person	at (Area Coo	462-7393 le & Daytime Telephone Number
	r the following amount made		
□ \$35 Filing Fee	□\$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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 chassee, FL 32314	Amendi Division Clifton 2661 Ex	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name	of Corporation as currently filed	with the Florida Dept. of State)
P 06000046117		
	(Document Number of Corp	oration (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this Florida	la Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new na	ame of the corporation:	
		The new
	ation "Corp," "Inc," or "Co".	company," or "incorporated" or the abbreviation A professional corporation name must contain the
B. Enter new principal office address,		
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )	
	<del>-</del> -	
	_	
C. Enter new mailing address, if appl		# 2 이
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	<del></del>
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		1 mark 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
D. If amending the registered agent an new registered agent and/or the ne		Florida, enter the name of the
new registered agent and/or the ne	RICK WEST	
Name of New Registered Agent	RICK WEST	
	101 SE 14TH ST	
	(Florida street add	iress)
New Registered Office Address:	FORT LAUDERDALE	Florida, 33316
New Registered Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent:	the state of the state of
l hereby accept the appointment as regis.	tered agent. I am familiar with a	nd accept the obligations of the position.
		<b>&gt;</b>
		Terra
	Signature of New Registe	red 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PTD	RICK WEST	101 SE 14TH ST
Add			FORT LAUDERDALE, FL 33316
Remove			
2) X Change	VSD	LEE WEST	101 SE 14TH ST
Add			FORT LAUDERDALE, FL 33316
Remove			
3) Change			
Add			
Remove			
4) Change	<del></del>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Pamaya			

	<u>icles, enter change(s) here</u> : (Be specific)
N/A	
	<del></del>
	<del></del>
<del></del>	
	ange, reclassification, or cancellation of issued shares,
. If an amendment provides for an exch:	
provisions for implementing the amen	ndment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
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provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

The date of each amendment(s) add date this document was signed.	pption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date artment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statemen ach voting group entitled to vote separately on the amendment(s):	t
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder	
Dated	27/17	
Signature	Lee wort	
selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	
L	EE WEST	
<del></del>	(Typed or printed name of person signing)	
Г	DIRECTOR / SHAREHOLDER	
_	(Title of person signing)	