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Award

COVER LETTER

TO: Amendment Section Division of Corporations

The enclosed Articles of Amendment and fee are submitted for fitting. Please return all correspondence concerning this matter to the following: MAIGUALIDA TORRES	NAME OF CORPO	RATION: MC DESIGN OF L	DADE CORP.		
The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MAIGUALIDA TORRES Name of Contact Person MC DESIGN OF DADE CORP Firm/ Company 9737 NW 41ST ST UNIT 325 Address DORAL, FL 33178 City/ State and Zip Code maigua.torres@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MAIGUALIDA TORRES 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: Certificate of Status Certificate Copy Certificate Copy (Additional copy is enclosed) Mailling Address Amendment Section Division of Corporations P.O. Box 6327 Sirvet Address Amendment Section Division of Corporations P.O. Box 6327 The Centre of Tallahassee	DOCUMENT NUM	BER: P07000030108			
MAIGUALIDA TORRES Name of Contact Person			bmitted for liling.		
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### Address DORAL, FL 33178		MAIGUALIDA TORRES			
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### Family address: (to be used for future annual report notification) For further information concerning this matter, please cull: ##################################		DORAL, FL 33178			
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	An Dis P.C	nendment Section vision of Corporations D. Box 6327	Amendment Section Division of Corporations The Centre of Tallahassee		

Articles of Amendment to Articles of Incorporation of

MC INTERCINITIE IN A INT. COOR

MC DESIGN OF DADE CORP	
(Name of Corporation as curren	itly filed with the Florida Dept. of State)
207000030108	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
N/A	The new
nume must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	N/A
,	~?
2. Enter new mailing address, if applicable:	Para di Para d
(Mailing address MAY BE A POST OFFICE BOX)	N/A 2
	-
). If amending the registered agent and/or registered office ad-	dress in Florida, enter the name of the
new registered agent and/or the new registered office address	
Name of New Registered Agent MAIGUALIDA TORRE	
(Florida s	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	<u>nt:</u>
hereby occupt the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New	Registered Agent, if changing

Check if applicable

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)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Trensurer; S = Secretary; D = Director; TR = Trusice; 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>A</u> Change	<u>r 1</u>	JOHN 1906	
<u>X</u>	¥	Mike Jones	
_X Add	SY	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	PD	MAIGUALIDA TORRES	9737 NW 41ST ST UNIT 325
X Add			DORAL, FL 33178
Remove	PVSD	CARLOS MATA	9737 NW 41ST ST UNIT 325
2) Change			DORAL, FL 33178
Add			10001E, 1 E 33178
X Remove			
Add			
Remove			
4)Change			
Add			
Remove			
5) Change	-,		
Add			
Remove			
6) Change			
\dd			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
N/A	

•

The date of each amendment(s) adoption:	, 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 document s effective date on the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	action and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following starmust he separately provided for each voting group entitled to vote separately on the amendment(s):	lement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
Daled 07/14/2020	
Signature (By a director, president or other officer – if directors or officers have not be	
selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
MAIGUALIDA TORRES	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	