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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION:	F D & M GROUP, INC	
DOCUMENT NU	MBER:	P09000011171	
The enclosed Article	les of Amendment and fee are	e submitted for filing.	
Please return all co	rrespondence concerning this	matter to the following:	
<u>-</u>		IRDES FEDERICI	
	Nat	me of Contact Person	
	F D 8	& M GROUP, INC.	·
-		Firm/ Company	
	P.O. BOX 820853		
Address			
	PEMBROKE P	INES, FLORIDA 33082-8053	
-		y/ State and Zip Code	
	lourdes@ E-mail address: (to be used	thefdmgroup.net for future annual report notification)	
For further informa	tion concerning this matter, p	lease call:	
	RDES FEDERICI of Contact Person	at (305) 89 Area Code & Daytime Teld	96-7757 ephone Number
		nde payable to the Florida Depart	
	\$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)
Mailing Ad Amendmen Division of P.O. Box 63 Tallahassee	t Section Corporations 327	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	e

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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F D & M GROUP, INC.

(Document Number of Corporation (if known)

(Name of Corporation as currently filed with the Florida Dept. of State)

P09000011171

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

name must be distinguishable and contain	the word "corp	oration," "compa	The new
abbreviation "Corp.," "Inc.," or Co.," or th name must contain the word "chartered," "pr			
B. Enter new principal office address, if app		12966-100 N.V	V. 42ND AVENUE
(Principal office address <u>MUST BE A STREET ADDR.</u>		OPA LOCKA,	FL 33054
			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)			
			
D. If amending the registered agent and/or new registered agent and/or the new reg			ı, enter the name of the
Name of New Registered Agent:			
New Registered Office Address:	(Flori	da street address)	
<u></u>	(. Florida
	(City)	_	, Florida (Zip Code)
New Registered Agent's Signature, if chang I hereby accept the appointment as registered			n the obligations of the position.
		·	
	Signature of New		

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	VINCENT L. FEDERICI	P.O. BOX 820853 PEMBROKE PINES, FL 33028	☐ Add ☐ Remove
SEC	RALPH A. FEDERICI,JR	P.O. BOX 820853 PEMBROKE PINES, FL 33028	_ ☑ Add _ ☐ Remove
			Add Remove
	ding or adding additional Articles, endeditional sheets, if necessary). (Be specified)		
<u>provisio</u>	nendment provides for an exchange, rons for implementing the amendment of applicable, indicate N/A)	eclassification, or cancellation of issif not contained in the amendment i	ued shares, tself:

The date of each amendment(s) ad	option: May 1, 2009
Effective date if applicable:	
(no n	nore than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statemen each voting group entitled to vote separately on the amendment(s):
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval
by	ng group)
(votin	ng group)
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
selected, l	cotor, 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 fiduciary by that fiduciary)
	LOURDES FEDERICI
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)