P090000239118

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SECRETARY OF STATE
DIVISION OF COMPORATION

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	Orchids and M	fore Inc.	
DOCUMENT NUMBE		0002390	- X
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this mai	tter to the following:	
J	erry Miller		
	orchids and More Inc.	Name of Contact Per	son
1	108 Kane Concourse	Firm/ Company 206	
— B	ay Harbor Islands	Address Florida 33154	
-		City/ State and Zip C	ode
jerrym	iller885@gmail.com		
We the management of a state.	E-mail address (to be us	sed for future annual rep	ort notification)
For further information of	concerning this matter, pleas	se cali	
		at ()
Name of	Contact Person	Area	Code & Daytime Telephone Number
Enclosed is a check for the	he following amount made	payable to the Florida D	epartment of State:
3 \$ 35 Filing Fee	☐\$43-75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Ameno Divisio P O, B	ng Address Idment Section on of Corporations ox 6327 assee, FL 32314	Am Div Clif 266	ret Address endment Section ision of Corporations ton Building 1 Executive Center Circle abassas El 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 18, 2013

JERRY MILLER ORCHIDS AND MORE, INC. 1108 KANE CONCOURSE SUITE 206 BAY HARBOR ISLAND, FL 33154

SUBJECT: ORCHIDS AND MORE, INC.

Ref. Number: P09000023968



We have received your document for ORCHIDS AND MORE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P09000023968 - JMZ GROUP, LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 513A00024383

See New Maure
IMZAIliAnce GROUP INC

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

STRICTED OF CHINCHMARKS

to

Articles of Incorporation

of

Orchids and More Inc.			
(Name of Corporation as currently	filed with the Florida Der	ot, of State)	Manada.
Po 900	10023 965	<u> </u>	_
(Document Number of	of Corporation (if known)		_
Pursuant to the provisions of section 607.1006, Floritis Articles of Incorporation	da Statutes, this Florida Pr	ofit Corporation adopts the followi	ng amendment(s) to
A. If amending name, enter the new name of the	corporation:		
JMZ Alliance Group Inc.			The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corword "chartered," "professional association," or th	p," "Inc," or "Co". A pi		
B. Enter new principal office address, if applicab (Principal office address MUST BE A STREET AD			
C. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>ox</u>)		- 3
			- 0073

D. If amending the registered agent and/or registered new registered agent and/or the new registered		rida, enter the name of the	90
Name of New Registered Agent			· ·
**************************************	(Florida street address)	•	
New Registered Office Address:		, Flonda	
	(Cuy)	(Zsp Code)	THE STATE OF THE S
New Registered Agent's Signature, if changing Re	prieterad Agenti		
I hereby accept the appointment as registered agent.	. I am familiar with and ac	cept the obligations of the position.	
Signature of I	New Registered Agent, if ch	anging	

address of each Officer	· and/or I	Director being added:	W HADE OF CHOICE OFFICE IN THE PUBLIC AND THE HADE, BILL
P = President; V= Vice Executive Officer; CFO held, President, Treasur Changes should be note	lirector tit Presiden = Chief er, Direct d in the fa	tle by the first letter of the officit; T= Treasurer; S= Secretal Financial Officer. If an officion would be PTD.	y; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief ertdirector holds more than one title, list the first letter of each office ohn Doe is listed as the PST and Mike Jones is listed as the V. There is
		Corporation, Saity Smith is na Hy Smith, SV as an Add.	med the V and S. These should be noted as John Doe, PT as a Change,
X Change	<u>PT</u>	John Doe	
X Remove	\overline{r}	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			, <u></u>
Remove			
4) Change			
Add			
Remove			
Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
6) Change			
Add			
Remove			
LL Kemove			

Attach additional sheets, if necessary).	icles, enter change(s) here (Be specific)
	·
<u>provisions for implementing the amer</u>	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	·
(if not applicable, indicate N/A)	·
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

	(s) adoption:	if other than the
date this document was signed		
11-1-2013 Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required	re adopted by the incorporators without shareholder action and shareholder	
11-1	-2013 ⁽)	
Dated		
Signature _		
(P	by a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court powinted fiduciary by that fiduciary)	
	Jerry Miller	
	•	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing) president	

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