## 709000064080

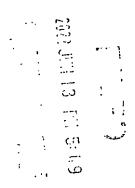
(Rеди	uestor's Name)	
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D CUSHING

## **COVER LETTER**

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPO	ORATION: UM GROUP, INC.					
	MBER: P09000064080			_		
	es of Amendment and fee are su	bmitted for filing.				
Please return all cor	respondence concerning this ma	tter to the following:				
	CARLOS MARTINEZ					
	UM GROUP, INC.	Name of Contact Person	1			
	,	Firm/ Company				
	3675 SW 139th PL					
	MIAMI, FL 33175	Address				
		City/ State and Zip Code	2			
	sales@umgroupinc.net			<del></del>		
	E-mail address: (to be us	sed for future annual report	notification)			
For further informat	ion concerning this matter, pleas	se call:		· :	2022	n- 13
CARLOS MARTIN	NEZ	at ( 305	510-1027	:	 	
Nam	e of Contact Person	Area Co	de & Daytime Telephone N	umber	نن	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:			
■ \$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)	; ; ; ; ;	(n 19	
	Iailing Address	· · · · · · · · · · · · · · · · · · ·	Address Iment Section			

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

UM GROUP, INC.

	OM GROOP, INC.		
(Name of	Corporation as currently	filed with the Florida Dept. of State)	, , , , , , , , , , , , , , , , , , , ,
P09000064080			
•	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this F	Clorida Profit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name	me of the corporation:		
name must be distinguishable and contain t "Inc.," or Co.," or the designation "Co "chartered," "professional association," o	orp," "Inc," or "Co". A	• •	•
B. Enter new principal office address, if (Principal office address MUST BE A ST			
		N/A	
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O			
D. If amending the registered agent and	l/or registered office addre	ess in Florida, enter the name of the	<u></u> ;
new registered agent and/or the new			
Name of New Registered Agent	N/A		<u> </u>
			1 10
-	(Florida stre	et address)	
New Registered Office Address:		, Florida	
	(1	City)	(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe		ith and accept the obligations of the po	sition.
	Signature of New Re	gistered Agent, if changing	<del></del>

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)

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) Change	SV	JUAN J. SANTANDREU	1250 WEST AVE 7L
X Add			MIAMI BEACH Florida 33139
Remove			
2) Change		_	
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	cles, enter change(s) here:  (Be specific)
N/A	
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	<del></del>
N/A	

•

	06/08/2022
The date of each amendment(	s) adoption: , if other than th
date this document was signed.	
2	06/08/2022
Effective date if applicable:	00/00/2022
<u></u>	(no more than 90 days after amendment file date)
	is block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes	east for the amendment(s) was/were sufficient for approval
hy	·
	(voting group)
sele	a director, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)  APLOS MANTINE Z  (Typed or printed name of person signing)
	PRESIDENT/ OWNER
	(Title of person signing)