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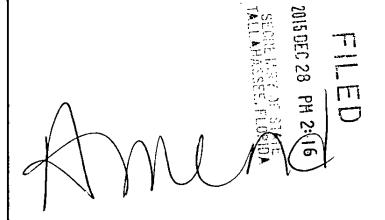
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO           | RATION: MOSS ARCHITE                                                                          | CTURE AND DESIGN GR                                                | ROUP INC.                                                                                  |
|-------------------------|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| DOCUMENT NUM            | BER: P10000010081                                                                             |                                                                    |                                                                                            |
| The enclosed Articles   | of Amendment and fee are su                                                                   | bmitted for filing.                                                |                                                                                            |
| Please return all corre | spondence concerning this ma                                                                  | tter to the following:                                             |                                                                                            |
|                         | BRETT MOSS                                                                                    |                                                                    |                                                                                            |
|                         |                                                                                               | Name of Contact Persor                                             | 1                                                                                          |
|                         | MOSS ARCHITECTURE A                                                                           | ND DESIGN GROUP INC                                                | •                                                                                          |
|                         |                                                                                               | Firm/ Company                                                      |                                                                                            |
|                         | 1200 Brickell Ave, Suite 141                                                                  | 0                                                                  |                                                                                            |
|                         |                                                                                               | Address                                                            |                                                                                            |
|                         | Miami, FL. 33131                                                                              |                                                                    |                                                                                            |
|                         |                                                                                               | City/ State and Zip Code                                           | e                                                                                          |
| hame                    | oss@gmail.com                                                                                 |                                                                    |                                                                                            |
|                         | <del>-</del>                                                                                  | sed for future annual report                                       | notification)                                                                              |
|                         |                                                                                               |                                                                    |                                                                                            |
| For further information | n concerning this matter, pleas                                                               | se call:                                                           |                                                                                            |
| BRETT MOSS              |                                                                                               | at (                                                               | 401-1130                                                                                   |
| Name                    | of Contact Person                                                                             | Area Co                                                            | de & Daytime Telephone Number                                                              |
| Enclosed is a check for | or the following amount made                                                                  | payable to the Florida Depa                                        | artment of State:                                                                          |
| S35 Filing Fee          | □\$43.75 Filing Fee & Certificate of Status                                                   | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)      |
| Am<br>Div<br>P.C        | iling Address<br>endment Section<br>ision of Corporations<br>. Box 6327<br>lahassee, FL 32314 | Ameno<br>Divisio<br>Clifton<br>2661 E                              | Address Iment Section on of Corporations (Building Executive Center Circle assee, FL 32301 |

## Articles of Amendment to Articles of Incorporation of

| amendment(s)<br>The new<br>reviation<br>ntain the |
|---------------------------------------------------|
| The new<br>reviation                              |
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Signature of New Registered 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                   | $\underline{V}$ | Mike Jones       |                          |
| <u>X</u> Add               | <u>sv</u>       | Sally Smith      |                          |
| Type of Action (Check One) | <u>Title</u>    | <u>Name</u>      | <u>Addres</u> s          |
| 1) Change                  | V               | CARLOS TREVISSON | 55 OCEAN LN DR, APT 4024 |
| X Add                      |                 |                  | KEY BISCAYNE 33149       |
| Remove                     |                 |                  |                          |
| 2) Change                  |                 | <u> </u>         |                          |
| Add                        |                 |                  |                          |
| Remove                     |                 |                  | <del></del>              |
| 3 ) Change                 |                 |                  |                          |
| Add                        |                 |                  |                          |
| Remove                     |                 |                  |                          |
| 4) Change                  |                 |                  |                          |
| Add                        | <del></del>     | -                |                          |
| Remove                     |                 |                  |                          |
| 5) Change                  |                 | _                |                          |
| Add                        |                 |                  |                          |
| Remove                     |                 |                  |                          |
| 6) Change                  |                 |                  |                          |
| Add                        |                 |                  |                          |
| P. umaria                  |                 |                  |                          |

| Attach additional sheets, if necessary). | (Be specific)                                              |
|------------------------------------------|------------------------------------------------------------|
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| f an amendment provides for an each      | hange, reclassification, or cancellation of issued shares, |
| provisions for implementing the ame      | endment if not contained in the amendment itself:          |
| (if not applicable, indicate N/A)        |                                                            |
|                                          |                                                            |
| · ·                                      |                                                            |
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|                                          |                                                            |
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| <del> </del>                             |                                                            |
|                                          |                                                            |
|                                          |                                                            |

| The date of each amendment(s) a date this document was signed.                  | doption:                                                                                                                                                                                       | , if other than the       |
|---------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Effective date <u>if applicable</u> :                                           |                                                                                                                                                                                                |                           |
|                                                                                 | (no more than 90 days after amendment file date)                                                                                                                                               |                           |
| <b>Note:</b> If the date inserted in this bedocument's effective date on the Do | plock does not meet the applicable statutory filing requirements, this date wepartment of State's records.                                                                                     | rill not be listed as the |
| Adoption of Amendment(s)                                                        | ( <u>CHECK ONE</u> )                                                                                                                                                                           |                           |
| The amendment(s) was/were add by the shareholders was/were su                   | opted by the shareholders. The number of votes east for the amendment(s) officient for approval.                                                                                               |                           |
|                                                                                 | proved by the shareholders through voting groups. The following statement 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                                                                                                                                          |                           |
| by                                                                              | (voting group)                                                                                                                                                                                 |                           |
| action was not required.                                                        | opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder                                               |                           |
| 12/23/201<br>Dated                                                              | <u> </u>                                                                                                                                                                                       |                           |
| (By a c<br>selecte                                                              | lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court (ted fiduciary by that fiduciary) |                           |
|                                                                                 | BRETT MOSS                                                                                                                                                                                     |                           |
|                                                                                 | (Typed or printed name of person signing)                                                                                                                                                      |                           |
|                                                                                 | PRESIDENT                                                                                                                                                                                      |                           |
|                                                                                 | (Title of person signing)                                                                                                                                                                      |                           |

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