P/00006003/

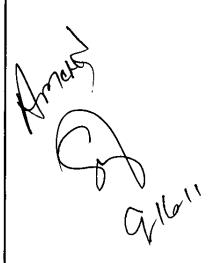
| (Requestor's Name) |
|---|
| |
| |
| (Address) |
| |
| • |
| (Address) |
| , |
| |
| (City/State/Zip/Phone #) |
| (-1.7, -1 |
| |
| PICK-UP WAIT MAIL |
| |
| |
| (Business Entity Name) |
| (dusiness Entity Name) |
| |
| (Doown and Newshar) |
| (Document Number) |
| |
| |
| Certified Copies Certificates of Status |
| |
| |
| Special Instructions to Filing Officer: |
| opolici monacino to i milg omoon. |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |





000212086160

09/15/11--01026--008 **43.75





COVER LETTER

TO: Amendment Section * Division of Corporations .

| NAME OF CORPO | RATION: | M & G BUSINESS GROU | JP, INC |
|---|--|---|--|
| DOCUMENT NUM | IBER: | P1000006002 | 1 |
| The enclosed Articles | s of Amendment and fee a | re submitted for filing. | |
| Please return all corre | espondence concerning thi | s matter to the following: | |
| | En | GAR GURMEITTE | |
| | | ame of Contact Person | |
| | | | |
| | M & G B | USINESS GROUP, INC Firm/ Company | |
| | | | |
| | | | |
| Address | | | |
| | KIS | SIMMEE, FL 34741 | |
| - | | ity/ State and Zip Code | w |
| | inspectio | onusa@gmail.com | |
| *************************************** | E-mail address: (to be use | d for future annual report notification |) |
| For further information | on concerning this matter, | please call: | |
| | _ | • | 715-5403 |
| EDGAR GURMEITTE Name of Contact Person | | at (407) Area Code & Daytime 1 | Felephone Number |
| Enclosed is a check f | or the following amount m | ade payable to the Florida Dep | |
| | • | _ | |
| S35 Filing Fee | ☑ \$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Add | ress | Street Address | |
| Amendment Section | | Amendment Section | |
| Division of Corporations | | Division of Corporations | |
| P.O. Box 6327 | | Clifton Building 2661 Executive Center Cir | role |
| Tallahassee, FL 32314 | | ZUUT EAGGRITTE CITEL CIT | ICIC |

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

M & G BUSINESS GROUP, INC

| | Articles of A | mendment | FILED IS PH 8:30 |
|---|----------------------------|--|------------------|
| | Articles of Inc | corporation 2 | ~// |
| , | of | Sc | Ex |
| M & 0 | BUSINESS GRO | DUP INC | 15 |
| | | the Florida Dept. of State) | PHD |
| | | 392 | |
| (Doct | ument Number of Corpora | tion (if known) | ONICA |
| Pursuant to the provisions of section amendment(s) to its Articles of Incor | | ntes, this Florida Profit Corporation adopts the following | wing |
| A. If amending name, enter the ne | w name of the corporation | o <u>n:</u> | |
| | | The new | |
| | o.," or the designation "C | poration," "company," or "incorporated" or the Corp," "Inc," or "Co". A professional corporation | |
| B. Enter new principal office address, if applicable: | | 1101 MIRANDA LN | |
| (Principal office address <u>MUST BE</u> | <u>A STREET ADDRESS</u>) | SUITE 131 | |
| | | KISSIMMEE, FL 34741 | |
| C. Enter new mailing address, if a | nnlicable: | | |
| (Mailing address MAY BE A PC | | 1101 MIRANDA LN | |
| | | SUITE 131 KISSIMMEE, FL 34741 | |
| D. If amending the registered ager new registered agent and/or the | | e address in Florida, enter the name of the ddress: | |
| Name of New Registered Age | nt: | | |
| New Registered Office Addre | (Flor | rida street address) | |
| | (City, | , Florida) (Zip Code) | |
| New Registered Agent's Signature, I hereby accept the appointment as re | if changing Registered / | • | ! |
| | (| | |
| | Signature of New | v Registered Agent, if changing | |

Page 1 of 3

If amending the Officers and/or Directors, enter the title and name of each officer/director being remaved and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) Address Title Name | Type of Action \square Add ☐ Remove _____ 🔲 Add ____ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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)

| The data of each amendment(s) adoption | :9,9,11 |
|---|--|
| The date of each amendment(s) adoption | (date of adoption is required) |
| Effective date if applicable: (no more the | nan 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/were adopted by the shareholders was/were sufficient | y the shareholders. The number of votes cast for the amendment(s) t for approval. |
| | by the shareholders through voting groups. The following statemen of the group entitled to vote separately on the amendment(s): |
| "The number of votes cast for the a | nmendment(s) was/were sufficient for approval |
| by(voting gro | '' |
| (voting grou | up) |
| The amendment(s) was/were adopted by action was not required. | y the board of directors without shareholder action and shareholder |
| The amendment(s) was/were adopted by action was not required. | y the incorporators without shareholder action and shareholder |
| Dated_07-0 | 9-11 |
| Dated | |
| selected, by an i | president or other officer – if directors or officers have not been neorporator – if in the hands of a receiver, trustee, or other court lary by that fiduciary) |
| E | DEAR GURNETTE |
| ************************************* | (Typed or printed name of person signing) |
| P | resident |
| (Ti | resident itle of person signing) |