P110000003283

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C.COULLIETTE
MAR 18 2011

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	PORATION:	MMJM MARKET CORPORATION
DOCUMENT NU	MBER:	P11000003283
The enclosed Artic	<i>les of Amendment</i> and f	ee are submitted for filing.
Please return all co	rrespondence concerning	g this matter to the following:
		JERRY LOCHIATTO
		Name of Contact Person
	MMJI	M MARKET CORPORATION
	Firm/ Company	
	835 S W 16TH STREET	
	Address	
	FOR	T LAUDERDALE, FL 33315
		City/ State and Zip Code
_	GIL E-mail address: (to b	PEREZ@MSN.COM a used for future annual report notification)
For further informa	ation concerning this ma	tter, please call:
	RRY LOCHIATTO	at (954)235-7109
Name	of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check	k for the following amou	nt made payable to the Florida Department of State:
	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 6	nt Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MMJM MARKET	CORPORATION
(Name of Corporation as currently	filed with the Florida Dept. of State)
P11000	0003283
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floamendment(s) to its Articles of Incorporation:	lorida Statutes, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:
	The new
	ble:
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	stered office address in Florida, enter the name of the
new registered agent and/or the new registere	
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida (City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)

<u>Title</u>	Name	Address	Type of Action
<u>P</u>	MICHAEL A LOCHIATTO	3662 GENERAL MARSHALL RD DAYTONA BEACH, FL 32124	☐ Add ☐ Remove
<u>P</u>	JERRY LOCHIATTO	835 S W 16TH STREET FORT LAUDERDALE, FL 33315	☑ Add □ Remove
<u>VP</u>	MICHAEL LOCHIATTO	835 S W 16TH STREET FORT LAUDERDALE, FL 33315	✓ Add ☐ Remove
F. If an amen	dment provides for an exchange, reclassion of the specific distribution of	ssification, or cancellation of issu	
	pplicable, indicate N/A)		
			- <u> </u>

The date of each amendment(s	s) adoption: MARCH 15, 2011
Effective date if applicable:	MARCH 15, 2011
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/wer	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e 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 c	ast for the amendment(s) was/were sufficient for approval
by	voting group)
((voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
Signature(By/selec	CH 15, 2011 CH 15
	JERRY LOCHIATTO
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)