P11000012204

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Addross)
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/State/Zip/Phone #)
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	
(Document Number) Certified Copies Certificates of Status	PICK-UP WAIT MAIL
(Document Number) Certified Copies Certificates of Status	
(Document Number) Certified Copies Certificates of Status	(Rusiness Entity Name)
Certified Copies Certificates of Status	(Dusiness Linky Name)
Certified Copies Certificates of Status	
· · · · · · · · · · · · · · · · · · ·	(Document Number)
Special Instructions to Filing Officer:	Certified Copies Certificates of Status
Special Instructions to Filing Officer:	
Special Instructions to Filing Officer:	
	Special Instructions to Filing Officer:

Office Use Only



800432054368

07/10/24--01034--009 ••35.00

5. CHATHAMA



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ON: J&G INVESTMEN	T GROUP INC	, ,		
DOCUMENT NUMBER:					
The enclosed Articles of Ar		bmitted for filin	g,		
Please return all correspond	ence concerning this ma	tter to the follow	ving:		
		LUIS F ROSA	LES		
		Name of Cor	ntact Persor)	
	EXECUTIVE TAX SERVICE				
	Firm/ Company				
	5931 NW 173 DR SUITE 9A				
	Address				
	MIAMI. FL 33015				
		City/ State ar	nd Zip Code	=======================================	
	1	uisfrosales@aol	.com		
	E-mail address: (to be us	ed for future an	nual report	notification)	
For further information con LUIS ROS			954	243-8742	
Name of Co	ntact Person	at (Area Co	de & Daytime Telephone Number	
Enclosed is a check for the	following amount made	payable to the F	lorida Depa	artment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Fili Certified Co (Additional enclosed)	рру	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

Articles of Amendment to Articles of Incorporation of

J&G INVESTMENT GROUP INC

300	G INVESTMENT OR	OUT INC		
(Name of Cor	poration as currently	filed with the Florida Dep	t. of State)	
	P11000012204			
(1)	Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006. I its Articles of Incorporation:	Florida Statutes, this F	lorida Profit Corporation a	dopts the followir	ng amendment(s
A. If amending name, enter the new name of	the corporation:			
name must be distinguishable and contain the wo "Inc.," or Co.," or the designation "Corp." "chartered," "professional association," or the	"Inc," or "Co". A	ompany," or "incorporated" professional corporation n	or the abbreviation ame must contain	_The new on "Corp.," in the word
B. Enter new principal office address, if appl (Principal office address <u>MUST BE A STREE</u>)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC				
D. If amending the registered agent and/or renew registered agent and/or the new regis		ess in Florida, enter the nai	ne of the	
Name of New Registered Agent	<u> </u>			_
		et address)		_
V D C LOT ALL	(, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		5 1. (1	
New Registered Office Address:		City)	, Florida(Zip (Code)
New Registered Agent's Signature, if changin I hereby accept the appointment as registered as		ith and accept the obligation	ONLY SEE AND A S	7031 7NT 10 I
	Signature of New Re	gistered Agent, if changing	URAT LORA	3 川
Check if applicable ☐ The amendment(s) is/are being filed pursuant	t to s. 607.0120 (11) (6	e), F.S.	OD A GO	\$ £

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)	Title	Name	<u>Addres</u> s
1) Change	D	ANNETTI GUZMAN	2421 SW 87 TERRACE
Add			MIRAMAR, FL 33029
X Remove		•	
2) Change	D	MARIO GUZMAN	2421 SW 87 TERRACE
Add			MIRAMAR, FL 33029
X Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5/ Change		<u> </u>	
Add			
Remove			2021
6) Change			<u> </u>
Add			2000 O
Remove			TO SEE THE
			Sections of the Control of the Contr

	necessary). (Be spec	rific)		
				•
				
	· -		·	
		 .		
				
				-
				
				-
		_		·
an amendment provides rovisions for implement (if not applicable, indi	ing the amendment if	lassification, or cance not contained in the	llation of issued share amendment itself:	<u>S.</u>
NIZA				
N/A				No. Co.
N/A				<u> </u>
N/A				<u> </u>
N/A				<u> </u>
N/A				<u> </u>
N/A				<u> </u>
N/A				<u> </u>
N/A				DIVISION OF CORPORATIONS OF LORIDA S

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment f	île date)
Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records.	tirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without action was not required.	t shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.	r the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the an	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Dated 6/24/24 Signature	
(By director, president or other officer – if directors or office selected, by an incorporator – if in the hands of a receiver, trus appointed fiduciary by that fiduciary)	
JOANDY GUZMAN	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	

