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| (Re | equestor's Name) | | |
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| (Ac | ddress) | | |
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| PICK-UP | ☐ WAIT | MAIL | |
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| (Document Number) | | | |
| Certified Copies | Certificates | s of Status | |
| Special Instructions to Filing Officer: | | | |
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JUL 1 7 2013

T. BROWN

| • | | COVER LETTER | |
|---|---|--|--|
| TO: Amendment Section Division of Corporat | ions | | |
| NAME OF CORPORAT | Mint | Home M | anagement, INC. |
| DOCUMENT NUMBER | *: <u> </u> | 700 L339: | 5 0 |
| The enclosed Articles of | Amendment and fee are su | bmitted for filing. | |
| Please return all correspon | ndence concerning this ma | tter to the following: | |
| | Carme | Name of Contact Person | |
| | Mint H | Firm/ Company | 1 -1 |
| | 667 For | syll St. | |
| | Boca R | Address Grant F L City/ State and Zip Code | 33487 |
| *************************************** | Carmen vanes E-mail address: (to be us | Sa 170 gmai sed for future annual report | notification) |
| For further information co | oncerning this matter, pleas | se call: | |
| Ca(Men Name of C | Contact Person | at (56) Area Coo | 900 - 7045 de & Daytime Telephone Number |
| Enclosed is a check for th | e 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) |
| | Address nent Section | | Address ment Section |
| | | | |

Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

| Articles of Amendment to Articles of Incorporation of GNAGEMENT INC. Articles of Amendment TNC. Articles of Incorporation of GNAGEMENT ARTICLES ARTIC | |
|--|--|
| 395 | |
| per of Corporation (if known) | |
| Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to | |
| the corporation: | |

| • | Articles of Incorporation | July Chars |
|--|---|---|
| Mint Home | Management INC, currently filed with the Florida Dept. of State) | |
| Oll COCO CO | 1 2 2 Q E | -0 |
| Document | Number of Corporation (if known) | |
| | • • • | |
| Pursuant to the provisions of section 607.19 its Articles of Incorporation: | 006, Florida Statutes, this Florida Profit Corporation adop | its the following amendment(s) |
| • | •• | |
| A. If amending name, enter the new name | ne of the corporation: | |
| | | The new |
| "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associati | in the word "corporation," "company," or "incorpora tion "Corp," "Inc," or "Co". A professional corporation," or the abbreviation "P.A." | ted" or the abbreviation on name must contain the |
| B. Enter new principal office address, if | applicable: | |
| (Principal office address MUST BE A ST | | |
| | | |
| | · · · · · · · · · · · · · · · · · · · | |
| C. Enter new mailing address, if application | | |
| (Mailing address MAY BE A POST O | FFICE BOX | |
| | · · | |
| | | |
| D. If amouding the registered areas and | | |
| new registered agent and/or the new | or registered office address in Florida, enter the name registered office address: | or the |
| Name of New Registered Agent | Carmen Rojas | |
| | 455 NE 5th Ave Ste D33 | < |
| - | (Florida street address) | , |
| New Registered Office Address: | Delray Beach, Florida | 33483 |
| New Registereu Office Address. | (Cig) | (Zip Code) |
| | - | |
| Norm Doubstaned A sentile Circust 15 h. | Destant A. | |
| New Registered Agent's Signature, if chall hereby accept the appointment as register | inging Registered Agent: red agent. I am familiar with and accept the obligations o | f the position. |
| 4 | min Rusez. | |
| <u></u> | 10011-001 | |

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 | <u>v</u> | Mike Jones | |
| | | | |
| X Add | <u>SV</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| 1) Change | P | Franco Policaro | 455 NE SMAVE |
| Add Remove | | | STE, D335 Delray Beach, FL 33483 |
| 2) Change Add | b | Carmen Rojas | 455 NE SMAVE. SHE, 0335 |
| Remove | | | Delray Beach, FL 33483 |
| 3) Change | ******** | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | The state of the s |
| 5) Change | | | N** |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| | rticles, enter change(s) here: . (Be specific) |
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| If an amendment provides for an excl | change, reclassification, or cancellation of issued shares, |
| provisions for implementing the ame | change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself: |
| If an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A) | change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself: |
| provisions for implementing the ame | change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself: |
| provisions for implementing the ame | change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself: |
| provisions for implementing the ame | change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself: |
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| provisions for implementing the ame | change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself: |
| provisions for implementing the ame | change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself: |

| (0/201) | :0 3 d d |
|--|-------------------|
| The date of each amendment(s) adoption: | if other than the |
| For the day of any 1 and 1 | |
| Effective date if applicable: /// / / (no more than 90 days after amendment file date) | |
| | |
| Adoption of Amendment(s) (CHECK ONE) | |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. | |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): | |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by | |
| (voting group) | |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. | |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. | |
| Dated 6/27/13 | |
| Signature Howe | _ |
| (By a director, president or other officer – if directors or officers have not been | |
| selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) | |
| | |
| tranco tolicaro | |
| (Typed or printed name of person signing) | _ |
| President | |
| (Title of person signing) | |