## PILOSSIGHY

| (Re                     | equestor's Name)   |           |
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| (Ad                     | ldress)            |           |
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| (Cit                    | ty/State/Zip/Phone | e #)      |
| PICK-UP                 | ☐ WAIT             | MAIL      |
| (Bu                     | isiness Entity Nan | ne)       |
| . (Do                   | ocument Number)    |           |
| Certified Copies        | _ Certificates     | of Status |
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## **COVER LETTER**

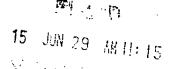
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Tallahassee, FL 32301

TO: Amendment Section Division of Corporations

| NAME OF CORPORA   | AT & RS GROUP                               | INC  |  |  |  |
|---|---|--|--|--|--|
| DOCUMENT NUMBER: P11000026614   |   |  |  |  |  |
|   | f Amendment and fee are su                  | ubmitted for filing.   |  |  |  |
| Please return all corresp   | ondence concerning this ma                  | tter to the following:   |  |  |  |
|   | GLA   | DYS MELENDEZ   |  |  |  |
|   |   | Name of Contact Person   | n  |  |  |
|   | RGM A                                       | CCOUNTING SERVICES   | CORP   |  |  |
|   |   | Firm/ Company  |  |  |  |
|   |   | 6402 PEMBROKE ROAD   |  |  |  |
| _   | <u> </u>                                    | Address  |  |  |  |
| MIRAMAR, FLORIDA 33023  |   |  |  |  |  |
| _   |   | City/ State and Zip Cod  | e  |  |  |
|   | RGMACCO                                     | DUNTING@HOTMAIL.CO   | OM   |  |  |
|   |   | sed for future annual report                                       | _  |  |  |
|   |   |  |  |  |  |
| For further information of  | concerning this matter, pleas               | se call:   |  |  |  |
| GLADYS MELENDEZ   | Z   | at (   | 962-8699   |  |  |
| Name of   | Contact Person                              | Area Co  | de & Daytime Telephone Number  |  |  |
| Enclosed is a check for t   | he 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) |  |  |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallohassee, Fl. 32314 |   | Amend<br>Divisio<br>Clifton  | Address ment Section on of Corporations Building                                       |  |  |

## Articles of Amendment to Articles of Incorporation of



AT & RS GROUP INC

| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrev "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must conta word "chartered." "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  HIALEAH, FL 33147   | The new<br>abbreviation  | nis Florida Profit Corporation adopts the following amendation  The attion," "company," or "incorporated" or the abbrevion "Co". A professional corporation name must contain "P.A."   | 1006, Florida Statutes, this me of the corporation:  tain the word "corporation "Corporation" at least the state of the corporation of the state of | Articles of Incorporation:  If amending name, enter the new na  me must be distinguishable and contorp., ""Inc.," or Co.," or the design |  |
|---|--------------------------|--|---|--|--|
| A. If amending name, enter the new name of the corporation:  The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrev "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contaword "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  HIALEAH, FL 33147  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | The new<br>abbreviation  | The  tion," "company," or "incorporated" or the abbrevi r "Co". A professional corporation name must contai n "P.A."   | ame of the corporation:  tain the word "corporate ation "Corp." "Inc," or   | Articles of Incorporation:  If amending name, enter the new na  me must be distinguishable and contorp., ""Inc.," or Co.," or the design |  |
| The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrev "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contaword "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  HIALEAH, FL 33147  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  3321 NW 106TH STREET  | abbreviation             | The tion," "company," or "incorporated" or the abbrevi r "Co". A professional corporation name must contai n "P.A."  | tain the word "corporat<br>ation "Corp," "Inc," or  | ne must he distinguishable and cont<br>orp.," "Inc.," or Co.," or the design   |  |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrev "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must conta word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  HIALEAH, FL 33147  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  3321 NW 106TH STREET   | abbreviation             | ition," "company," or "incorporated" or the abbrevi<br>r "Co". A professional corporation name must contai<br>m "P.A."   | ation "Corp," "Inc," or   | orp.," "Inc.," or Co.," or the design  |  |
| "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must conta word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  HIALEAH, FL 33147  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  3321 NW 106TH STREET   | abbreviation contain the | r "Co". A professional corporation name must contain "P.A."  | ation "Corp," "Inc," or   | orp.," "Inc.," or Co.," or the design  |  |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  HIALEAH, FL 33147  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  3321 NW 106TH STREET   |                          | 3321 NW 106TH STREET   |   |  |  |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )  HIALEAH, FL 33147  C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )  3321 NW 106TH STREET   |                          |  | if annlicable:  | Enter new principal office address   |  |
| (Mailing address MAY BE A POST OFFICE BOX)  | THABLAIT, I L. 23147     |  |   |  |  |
| (Mailing address MAY BE A POST OFFICE BOX)  |                          |  |   |  |  |
|   |                          | 3321 NW 106TH STREET   |   |  |  |
|   |                          | HIALEAH, FL 33147  |   |  |  |
| ·   |                          |  |   |  |  |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of the  |                          |  |   |  |  |
| new registered agent and/or the new registered office address:  |                          | ress:  | v registered office addre   | new registered agent and/or the nev  |  |
| Name of New Registered Agent HENRY CHAVARRO   | _                        |  | HENRY CHAVARRO  | Name of New Registered Agent   |  |
| 3321 NW 106TH STREET  |                          |  | 3321 NW 106TH STRE  |  |  |
| (Florida street address)  |                          | EET  |   |  |  |
| New Registered Office Address: HIALEAH , Florida 33147  |                          | Manufacture Control of the Control o | (Florida .  |  |  |
| (City) (Zip Code)   |                          | s street address)  | ·   | Naw Pagistarad Office Address  |  |

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<br>(Check One) | <u>Title</u> | <u>Name</u>        | Address              |
| 1) Change                     | PT           | HENRY CHAVARRO     | 3321 NW 106TH STREET |
| X Add                         |              |                    | HIALEAH, FL 33147    |
| Remove                        |              |                    |                      |
| 2) Change                     | VP           | ALTAGRACIA TAVAREZ | 7825 ALHAMBRA BLVD   |
| Add                           |              |                    | MIRAMAR, FL 33023    |
| Remove                        |              |                    |                      |
| 3) X Change                   |              |                    |                      |
| Add                           |              |                    |                      |
| Remove                        |              |                    |                      |
| 4) Change                     |              |                    |                      |
| Add                           |              |                    |                      |
| Remove                        |              |                    |                      |
| 5) Charac                     |              |                    |                      |
| 5) Change                     |              |                    |                      |
| Add                           |              |                    |                      |
| Remove                        |              |                    |                      |
| 6) Change                     | <del></del>  |                    |                      |
| Add                           |              |                    |                      |
| Remove                        |              |                    |                      |

|   | z additional Artic<br>rs, if necessary). | (Be specific)                          | <u>ctar nere</u> .                    |                   |          |
|---|--|--|---------------------------------------|-------------------|----------|
| ARTICLE IV: The numb  | er of shares th Co                       | rporation is author                    | orized to issue is:                   |                   |          |
| Henry Chavarro 90%  | of Shares                                |  |                                       |                   |          |
| Altagracia Tavarez 10%  | % of Shares                              |  |                                       |                   |          |
|   |  |  |                                       |                   |          |
|   |  |  | · · · · · · · · · · · · · · · · · · · |                   |          |
|   |  |  |                                       |                   | <u> </u> |
|   |  | <del></del>                            |                                       |                   |          |
|   |  | ······································ |                                       |                   |          |
| ,   |  |  |                                       | <u> </u>          |          |
|   |  |  |                                       |                   |          |
|   |  |  |                                       |                   |          |
|   |  |  | <u></u>                               |                   |          |
|   |  |  |                                       |                   |          |
|   |  |  |                                       |                   |          |
|   | ides for an excha                        | inge, reclassifica                     | tion, or cancellation                 | of issued shares. |          |
| If an amendment provi   |  |  |                                       |                   |          |
| If an amendment proviprovisions for implem (if not applicable,        | ienting the amend indicate N/A)          | <u>dment if not con</u>                | tained in the amend                   | ment itself:      |          |
| provisions for implem   | indicate N/A)                            | dment if not con                       | tained in the amend                   | ment itself:      |          |
| provisions for implem   | indicate N/A)                            | dment if not con                       | tained in the amend                   | ment itself:      |          |
| provisions for implem   | indicate N/A)                            | dment if not con                       | tained in the amend                   | ment itself:      |          |
| provisions for implem   | indicate N/A)                            | dment if not con                       | tained in the amend                   | ment itself:      |          |
| If an amendment provi<br>provisions for implem<br>(if not applicable, | indicate N/A)                            | dment if not con                       | tained in the amend                   | ment itself:      |          |
| provisions for implem   | indicate N/A)                            | dment if not con                       | tained in the amend                   | ment itself:      |          |

| The date of each amendmen                          | 06/19/2015<br>t(s) adoption:  | , if other than the               |
|--|---|-----------------------------------|
| date this document was signed                      | l   |                                   |
| Effective date <u>if applicable</u> :              | 06/19/2015  | •                                 |
| Effective date in approacte.                       | (no more than 90 days after amendment file date)  |                                   |
|  | this block does not meet the applicable statutory filing requirements, the Department of State's records.   | is date will not be listed as the |
| Adoption of Amendment(s)                           | ( <u>CHECK ONE</u> )  |                                   |
|  | re adopted by the shareholders. The number of votes cast for the amendmere sufficient for approval.   | nent(s)                           |
|  | re approved by the shareholders through voting groups. The following stated for each voting group entitled to vote separately on the amendment(s):              |                                   |
| "The number of votes                               | s cast for the amendment(s) was/were sufficient for approval  |                                   |
| by   | "   |                                   |
| oj <u> </u>  | (voting group)  |                                   |
| ☐ The amendment(s) was/we action was not required. | re adopted by the board of directors without shareholder action and sharel  | nolder                            |
| The amendment(s) was/wer action was not required.  | re adopted by the incorporators without shareholder action and shareholder  | er                                |
| 06/19<br>Dated                                     | 9/2015  |                                   |
| Baca   | CALLAND P   |                                   |
| Signature  |   | <del></del>                       |
|  | by a director, president or other officer – if directors or officers have not be elected, by an incorporator – if in the hands of a receiver, trustee, or other |                                   |
|  | oppointed fiduciary by that fiduciary)  | court                             |
|  | ALTAGRACIA TAVAREZ  |                                   |
|  | (Typed or printed name of person signing)   |                                   |
|  | VICEPRESIDENT   | -                                 |
|  | (Title of person signing)   |                                   |