P11000039741

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TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations	
NAME OF CORPORATION: MFM INVESTMENTS, INC.	
DOCUMENT NUMBER: P11000039741	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Carla M. Perez Name of Contact Person	
Dynamic Digits Accounting Solution	ns,LL
2750 SW 137th Terrace	
Miramar, FL 33027 City/State and Zip Code	/
E-mail address: (to be used for future annual report notification)	om
For further information concerning this matter, please call:	
Carla M. Perez at (954) 854-1172 Name of Contact Person at (954) Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee	nclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

MFM Investmer		dha Dhaitha Dani	F C 1 - 1 - 1	
(Name of Corporation as curre		<u>the Florida Dept. (</u>	ot State)	
P1100003974 (Document Num		ion (if known)		
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	·-	, ,	ofit Corporatio	n adopts the following
A. If amending name, enter the new name of	the corporatio	<u>n:</u>		
				The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the contain the word "chartered," "prof	designation "Ĉ	orp," "Inc," or "C	o". A professi	onal corporation
B. Enter new principal office address, if appl				.x*
(Principal office address <u>MUST BE A STREET</u>	(ADDRESS)			A SF
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	' <u>E BOX</u>)			APR 28 AM 9: 55
D. If amending the registered agent and/or renew registered agent and/or the new regist			, enter the nan	ne of the
		M. Per		
New Registered Office Address:	2750 S (Flori	da street address)	<u>re</u> m	
<u>-</u>	MICAN (City)	nar	, Florida_ (Zip Code)	33027
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag	g Registered A	gent:		

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>VP</u>	Hermelando Dlguin	985 NE 33 rd Terr, 1 Homestead, FL 33033	+ 20 _ ⊠ Add _ □ Remove -
			_ ☐ Add _ ☐ Remove
			Add Remove
	dditional sheets, if necessary). (Be speci		
provisi	nendment provides for an exchange, recons for implementing the amendment if and applicable, indicate N/A)		

The date of each amendment(s)	adoption: 4/26/2011
	(date of adoption is required) 4 26 201 which is a sequired of the sequired
(n	o more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes case	t for the amendment(s) was/were sufficient for approval
by(va	oting group)
The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated 4	26/2011
selected	firector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
.4	(Typed or printed name of person signing)
_	President (Title of person signing)