

P12000008407

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H15000133627 3)))



H150001336273ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

2015 JUN -4 AM 8:56  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
ELECTRONIC FILING

RECEIVED

15 JUN -4 PM 4:57

FLORIDA  
TALLAHASSEE  
DIVISION OF CORPORATIONS  
DEPARTMENT OF STATE

COR AMND/RESTATE/CORRECT OR O/D RESIGN  
M & M CONSULTANT USA, INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Amnd  
@ 4/5/15

H15000133627

Articles of Amendment  
to  
Articles of Incorporation  
of

M & M Consultant USA Inc

Florida Document Number: P1200008407

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

Delete: Madelnis M. Pereira Lopez as  
P and RA.

Add: Livan Rodriguez as P & RA w/ the  
address: 153 43 SW 42 Terrace

MIAMI FL 33185

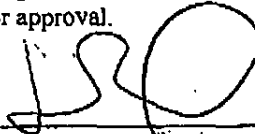
change all addresses to:

153 43 SW 42 Terrace

MIAMI FL 33185

These articles of amendment were adopted on 06-04-15

The corporation has only one group of voting stock. This amendment was approved by the shareholders and the number of votes cast for amendment was sufficient for approval.



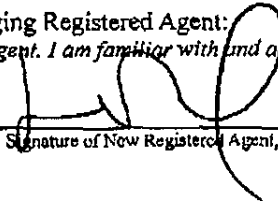
Signature

Livan Rodriguez (P)

Printed Name and Title

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

H15000133627

2015 JUN -4 AM 8:56  
SECRETARY OF STATE  
OFFICE OF REVENUE