P12000023995

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Amend Mand Jan 14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: M AND S PARTNERS INC						
DOCUMENT NUMBER: P12000023995						
	of Amendment and fee are su					
Please return all corre	spondence concerning this ma	tter to the following:				
	SHABI FLORES					
	Name of Contact Person M AND S PARTNERS INC					
9100 W BAY HARBOUR DR #8CE						
	BAY HARBOUR ISLAND, FL 33154					
ha	rbara@imberandc	City/ State and Zip Code	e			
		sed for future annual report	notification)			
For further information concerning this matter, please call:						
SHABI FLOR	RES	at (786	, 502-0576			
Name	of Contact Person		de & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department 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)			
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio Clitton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301			

Articles of Amendment to Articles of Incorporation of



M AND S PARTNERS INC

(Name of Corporation as currently filed with the F)	orida Dept, of State)
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
MIAMI FAST TOWING INC	The new
name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Gword "chartered," "professional association," or the abbreviation "Lord".	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	n/a
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a
, u	
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
Name of New Registered Agent n/a	
(Florida stre	eet address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	vith and accept the obligations of the position.
Signature of New Registered A	Igent, 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 <math>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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP		MARCELO PIZELMAN	1420 16TH STREET #2
Add				MIAMI BEACH, FL
Remove				33139
2) Change		_		
Add				
Remove				
3) Change		<u> </u>		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
N/A	, , , , , , , , , , , , , , , , , , ,	J). (# g)			
					•
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· · ·					
				<u>-</u>	
					
F If an amend	ment provides for an	avahanga raplace	ifiantian ay asna	allation of issued sh	10 mas
provisions	for implementing the	amendment if not	contained in the	amendment itself:	141 C5,
N/A	applicable, indicate N/.	4)			
		a.			·
					TO THE STREET CONTRACTOR
					
				<u></u>	
					
					•

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date if applicable:		_
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	12-10-2014.	
selected	rector, 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 ed fiduciary by that fiduciary)	
	SHABI FLORES	
	(Typed or printed name of person signing)	
	PRESIDENT	
•	. (Title of person signing)	