# P/2000/0657/8

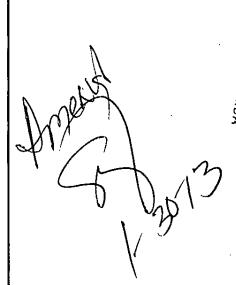
(Re	questor's Name)	•
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
-		

Office Use Only



400243656824

01/28/13--01010--012 \*\*35.00





### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: MB DISCO	UNT INC			
DOCUMENT NUME	BER: P1200006571	8			
	of Amendment and fee are sul				
Please return all corres	spondence concerning this mat	ter to the following:			
	ALAIN RAMIREZ				
,		Name of Contact Persor	1		
	MB DISCOUNT INC				
		Firm/ Company			
	1603 NW 27AVE				
		Address			
	MIAMI FL,33125				
		City/ State and Zip Code	e		
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	n concerning this matter, pleas	e call:			
ALAIN RAMIREZ					
Name of Contact Person			de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	urtment 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		Amend	Address Iment Section on of Corporations		
P.O. Box 6327		Clifton Building 2661 Executive Center Circle			
Tallahassee, FL 32314		Tallahassee Ft 32301			

## **Articles of Amendment** Articles of Incorporation

	11
13 JAN	28 AM 9:55
TALLAFIA	AM 9:55
,	28 AM 9:56 SEE, FLORIDA

### MB DISCOUNT INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P12000065718

(Document Number of Corporation (if known)

nent(s) to

	ny," or "incorporated" or the abbreviation fessional corporation name must contain to
if applicable: TREET ADDRESS )	
icable: OFFICE BOX	
nd/or registered office address in Floric w registered office address:	da, enter the name of the
ALAIN RAMIREZ	
1603NW 27 AVE	
(Florida street address)	
(City)	, Florida <b>F L</b> (Zip Code)
···//	• •
	icable: OFFICE BOX  ALAIN RAMIREZ  1603NW 27 AVE  (Florida street address)  MIAMI

# 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.

Example: X Change	PT	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	<u>Addres</u> s	
1) Change	Р	PATRICIA DUARTE	1603 NW 27 AVE	
Add			MIAMI,FL 33125	
X Remove				
2) X Change	Р	ALAIN RAMIREZ	1603 NW 27AVE	
Add			MIAMI,FL 33125	
Remove				
3)Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

<b>amending or adding additions</b> ttach <i>additional sheets, if necess</i>	ary). (Be spe	cific)			
			<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>		
·					
· · · · · · · · · · · · · · · · · · ·					
		,			
			•		
•					
				<del></del>	
			<del></del>		
1 4 11 6		-11 <i>6</i> 41		<b>f</b> : d . b	
an amendment provides for a rovisions for implementing th	n exchange, re	<u>classification,</u> if not contain.	<u>or cancellatio</u> ed in the amen	<u>n oi issuco snarc</u> dment itself:	<u>s.</u>
(if not applicable, indicate N	V/A)	I MOL COMMIN	ou in the anien	Cantal House	
	,				
					·-··
					· · · · ·
		•			
		•			<del></del>
		·			

The date of each amendment(s) adop	otion:
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were adopte by the shareholders was/were suffice	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.
	ved by the shareholders through voting groups. The following statement ch 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)
_	ed by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder
Dated_1/10/201	(3)
Signature	and the section of Green is directors on officers have not been
selected, l	ctor, president or other officer - if directors or officers have not been by an incorporator - if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)
••	LAIN RAMIREZ
	(Typed or printed name of person signing)
P	RESIDENT
<del></del>	(Title of person signing)