P13000030895

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	

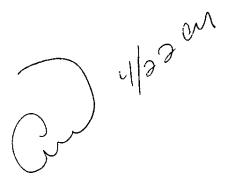




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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	CATION:		MENT GROUP INC
DOCUMENT NUME	BER: P1300003089	5	
	of Amendment and fee are su		
Please return all corres	spondence concerning this ma	tter to the following:	
	Oliver Perez		
,		Name of Contact Person	1
		Firm/ Company	
	7200 Corporate C	Center Drive Sui	te 510
		Address	
	Miami, FL 33126		
		City/ State and Zip Code	2
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Oliver Perez		at (305	, 405-7510
Name o	of Contact Person	Area Co	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			Address ment Section
	sion of Corporations	Division of Corporations	
P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation

NORTHERN CAPITAL MANAGEMENT GROUP INC

(Name of Corporation as currently filed with the	
P13000030895	
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, the its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporal "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	<u></u>
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	——————————————————————————————————————
	A PR
C. Enter new mailing address, if applicable:	m j pr
(Mailing address MAY BE A POST OFFICE BOX)	
	22
	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address.	dress in Florida, enter the name of the
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·
(Florida :	street address)
New Registered Office Address:	, Florida
(Cit	(Zip Code)
New Registered Agent's Signature, if changing Registered Age	nt·
I hereby accept the appointment as registered agent. I am familia	r with and accept the obligations of the position.
Signature of New Registere	d Agant 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 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 (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	Oliver Perez	7200 CORPORATE CENTER DRIVE
X Add			Suite 510
Remove			MIAMI, FL 33126
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Domova			

f amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)	
		_
		_
		_
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		

The date of each amendment(s) adoption: 4/11/2013		
Effective date if applicable:		
(no more than 90 days after amendmen	t file date)	
Adoption of Amendment(s) (CHECK ONE)		
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast f by the shareholders was/were sufficient for approval.	or the amendment(s)	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the distribution.		
"The number of votes cast for the amendment(s) was/were sufficient for approva	d	
by(voting group)		
(voting group)		
☐ The amendment(s) was/were adopted by the board of directors without shareholder ac action was not required.	tion and shareholder	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action action was not required.	and shareholder	
Dated 4/11/2013		
Signature Office		
(By a director, president or other officer – if directors or offi	cers have not been	
selected, by an incorporator - if in the hands of a receiver, tr	ustee, or other court	
appointed fiduciary by that fiduciary)		
Oliver Peret		
(Typed or printed name of person signing)	
Product		
(Title of person signing)		