P13000046219

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SECRETARY OF STATE
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FEB 2 5 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: NGS GROUP CO DOCUMENT NUMBER: P13000046219 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jorge Lopez Name of Contact Person **NGS Group Co** Firm/ Company **2504 NE 2ND AVE** Address Boca Raton FL 33431 City/ State and Zip Code Jlopez73 7@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561) 674-5032

Area Code & Daytime Telephone Number Jorge Lopez Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

NGS GROUP CO

14 FEB 24 AM 8: 10

(Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE TALLAHASSEE, FLORIDA P13000046219

(Document Number of Corporation (if known)

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

ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "oord "chartered," "professional association," o	Corp," "Inc," or "Co". A profess		
. Enter new principal office address, if appli			
Principal office address <u>MUST BE A STREET</u>	<u>(ADDRESS</u>)		

. Enter new mailing address, if applicable:	E DAVI		
(Mailing address MAY BE A POST OFFICE	<u> </u>		
	, ,		····
,	 		····
. If a manding the registered agent and/or re-	gistaved office address in Florida	anter the name	of the
. If amending the registered agent and/or renew registered agent and/or the new regist		enter the name	of the
new registered agent and/or the new regist	ered office address:		e of the
			e of the
new registered agent and/or the new regist	ered office address:		e of the
Name of New Registered Agent	ered office address:		e of the
new registered agent and/or the new regist	ered office address:		e of the

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>	Name	<u>Addres</u> s
1) Change	DPS	RAMEIX, SANTIAGO	2504 NORTHWEST 2ND
Add			Boca Raton FL 33431
Remove			
2) Change	DPS	LOPEZ, JORGE	2504 NW 2ND AVE
Add			Boca Raton FL 33431
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			4444
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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

The date of each amendment(s) ad	loption:	, if other than th
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient 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)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated_02/21/20	014	
Signature		<u></u>
	irector, 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)	
	Jorge Lopez	
	(Typed or printed name of person signing)	
	DV	
	(Title of person signing)	

TILED

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SECRETARY OF STATE
THANKS FF FI ORDA