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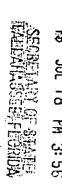
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: MIG&MICH, INC | C. | | | | | |
|--|--|--|--|--|--|--|
| DOCUMENT NUMBER: P13000049628 | | | | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | | |
| ANDRES E. BAZO | ANDRES E. BAZO | | | | | |
| | Name of Contact Person | | | | | |
| KOPELOWITZ OSTRO | KOPELOWITZ OSTROW | | | | | |
| | Firm/ Company | | | | | |
| 2525 PONCE DE LEON | BLVD SUITE 625 | | | | | |
| | Address | | | | | |
| CORAL GABLES FL 33 | 134 | | | | | |
| | City/ State and Zip Code | | | | | |
| BAZO@KOLAWYERS.COM | | | | | | |
| _ | ed for future annual report | notification) | | | | |
| For further information concerning this matter, please ANDRES BAZO | e call: | 4058078 | | | | |
| Name of Contact Person | | _) 4000070 le & Daytime Telephone Number | | | | |
| Enclosed is a check for the following amount made p | | | | | | |
| ■ \$35 Filing Fee | ☐\$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 P.O. Box 6327 Tallahassee, FL 32314 | Amend Divisio Clifton 2661 E. | Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301 | | | | |

Articles of Amendment to Articles of Incorporation of

FILE® 18 JUL 18 PM 3:56

MIG&MICH, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P13000049628 (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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: _, Florida 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

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 | <u>PT</u> | John Do | <u>oe</u> | |
|-------------------------------|---------------------------------------|-------------------|---------------------|-------------------|
| X Remove | <u>v</u> | Mike Jo | ones | |
| _X Add | <u>sv</u> | Sally Si | <u>nith</u> | |
| Type of Action (Check One) | <u>Title</u> | | Name | Address |
| 1) Change | D | | YSMARY FERMIN DE R. | 1997 NW 130 AVE |
| Add | | | | PEMBROKE PINES FL |
| X Remove | | | | 33028 |
| 2) Change | D | | YSAYRA MORGADO | 1991 NW 130 AVE |
| X Add | | · ···· | | PEMBROKE PINES FL |
| Remove | | | | 33028 |
| 3) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | · · · · · · · · · · · · · · · · · · · | _ | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | | | |
| Add | | | | |
| Remove | | | | |

| (A + | mending or adding additional Articles, enter change(s) here: ach additional sheets, if necessary). (Be specific) |
|----------|--|
| Αι | ca daditional sneets, if necessary). (Be specific) |
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| <u> </u> | n amendment provides for an exchange, reclassification, or cancellation of issued shares, |
| p | ovisions for implementing the amendment if not contained in the amendment itself: |
| | (if not applicable, indicate N/A) |
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| The date of each amendment(s) adoption: date this document was signed. | | |
|--|---|----------------|
| Effective date if applicable: | | |
| | (no more than 90 days after amendment 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 add action was not required. | pted by the board of directors without shareholder action and shareholder | |
| ☐ The amendment(s) was/were add action was not required. | pted by the incorporators without shareholder action and shareholder | |
| 07/10/1 | 3 | |
| Signature | Manufic Secure | |
| (By d d selected | irector, president or other officer – if directors or officers have not been it, by an incorporator – if in the hands of a receiver, trustee, or other court led fiduciary by that fiduciary) | |
| | YSMARY FERMIN | |
| | (Typed or printed name of person signing) | |
| | DIRECTOR | |
| | (Title of person signing) | - - |