P130	00076014
(Requestor's Name) (Address)	800316358838
(Address) (City/State/Zip/Phone #)	05/02/1801011004 ++35.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	211 NUG - 2 M
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AUG 07 2018 C MCNAIR

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:

DOCUMENT NUMBER: P13000076014

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

RODRIGO NAHABETIAN

Name of Contact Person

DARMEN USA CORP

Firm/ Company

470 ANSIN BLVD STE K

Address

HALLANDALE, FL 33009

City/ State and Zip Code

INFO@DARMENUSA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RODRIGO NAHABETIAN	786 at (2903660
Name of Contact Person	Area Code	& Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status S43.75 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 <u>Street Address</u> Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



Articles of Amendment to Articles of Incorporation of

MAIRIG CORPORATION

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

P13000076014

(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:

The new 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. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)

- C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)
- 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:

(Cina

(Zip Codz)

_, 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 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, Sully 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: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
<u>X</u> Add	\underline{SV}	Sally Smith	
<u>Type of Action</u> (Check One)	Title	Name	<u>Addres</u> s
1) Change	Т	ALVAREZ, MERCEDES L	470 ANSIN BLVD STE K
Add			HALLANDALE, FL 33009
X Remove			
2) Change	т	GECHIDJIAN, MERCEDES L	470 ANSIN BLVD STE K
2) Change Add			HALLANDALE, FL 33009
Remove			
3) Change	S	GECHIDJIAN, GUADALUPE E	470 ANSIN BLVD STE K
X Add			HALLANDALE, FL 33009
Remove			
4) Change			
Add			
Remove			
5) Change	<u></u>		
Add			
Remove			
6) Change			
Add			<u>.</u>
Remove			

Attach additional	sheets, if necessary)	. (Be specific)			
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If an amendment	provides for an exc	change reclassific	estion or cancella	tion of issued she	PA
provisions for in	plementing the am	endment if not co	ontained in the am	endment itself:	11 (3,
(if not applied	able, indicate N/A)				
			· · · · · · · · · · · · · · · · · · ·		
				·	

The date of each amendment(s) adoption: _______ if other than the date this document was signed.

Effective date if applicable:

(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

□ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

□ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)

- The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

July 30th, 2018 Dated Jun bojs

Signature

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

(Typed or printed name of person signing)

(Title of person signing)