P14000034651

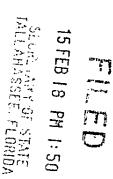
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(PM) 2-20-15

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: MATT'S SERVICES, INC. **DOCUMENT NUMBER:** P14000034651 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JOSE F. CERVANTES Name of Contact Person MATT'S SERVICES, INC. Firm/ Company 931 LYONS ROAD # 4106 Address COCONUT CREEK, FL 33065 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JOHANA GARCIA at (954 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: メ 🖬 \$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) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation

MATT'S SERVICES, INC.

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

P14000034651	s currently med with the	Clorida Dept. of State)	
(Docume	ent Number of Corporation (if known)	50
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, this	Florida Profit Corporation ac	lopts the following amendmen
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the desig word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corpora	orated" or the abbreviation
B. Enter new principal office address,	. if applicable:	N/A	
(Principal office address MUST BE A S			
			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A	
(Mulling dudress MAT BE A FOST	OFFICE BOX		
D. If amending the registered agent as	nd/or registered office add	ress in Florida, enter the nan	<u>ie of the</u>
new registered agent and/or the ne		<u>s:</u>	
Name of New Registered Agent	N/A		
		reet address)	
New Registered Office Address:	N/A	, Florida_	
	(City))	(Zip Code)
New Registered Agent's Signature, if o	hanging Registered Agent	:	
I hereby accept the appointment as regis			of the position.
Si	gnature 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, 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	JOHANA GARCIA	931 LYONS ROAD # 4106
Add			COCONUT CREEK, FL 330
Remove			
2) Change	S-T	JOSE F. CERVANTES	931 LYONS ROAD # 4106
Add			COCONUT CREEK, FL 330
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

(Attach additional sheets, if necessary).	cles, enter chang (Be specific)			
/A				
				
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		ation, or cancella	tion of issued sha	ires,
If an amendment provides for an exch	ange, reclassifica	ntained in the an	andmant itralf.	
provisions for implementing the amer	ange, reclassific	ntained in the an	<u>iendment itself:</u>	
(if not applicable, indicate N/A)	ange, reclassific	ntained in the an	<u>iendment itself:</u>	
(if not applicable, indicate N/A)	ange, reclassification	ntained in the an	nendment itself:	
(if not applicable, indicate N/A)	ange, reclassific	ntained in the an	endment itself:	
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(if not applicable, indicate N/A)	ange, reclassific	ntained in the an	nendment itself:	
(if not applicable, indicate N/A)	ange, reclassific	ntained in the an	nendment itself:	
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassific	ntained in the an	endment itself:	
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassific	ntained in the an	nendment itself:	
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A) A	ange, reclassific	ntained in the an	nendment itself:	
(if not applicable, indicate N/A)	ange, reclassific	ntained in the an	endment itself:	
(if not applicable, indicate N/A)	ange, reclassific	ntained in the an	endment itself:	
(if not applicable, indicate N/A)	ange, reclassific	ntained in the an	nendment itself:	

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)	
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 statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	t
"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.	
Dated X 2/11/15	
Signature X JOHANA GALCIA	<u>.</u>
(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)	
JOHANA GARCIA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	