P14000040760

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10/14/14

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: MMP WORLDWIDE INC DOCUMENT NUMBER: P14000040760 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: TIMOTHY S HART, CPA Name of Contact Person MMP WORLDWIDE, INC Firm/ Company 2929 E COMMERCIAL BLVD PH-E Address FORT LAUDERDALE, FL 33308 City/ State and Zip Code thart@r3accounting.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: TIMOTHY HART 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: ■ \$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

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

is enclosed)

Articles of Amendment to Articles of Incorporation of

FILED.

(Zip Code)

MMP WORLDWIDE INC	,		-2814 OCT -6 PP	4 7. 60		
(Name of Corporation as	currently filed with the	Florida Dept. of State)	Jalla no.	FISTATE A		
P14000047060			SE STEE	FISTATE		
(Documen	t Number of Corporation	(if known)	90°	, ,		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corpora		wing amendment(s) to		
A. If amending name, enter the new na	me of the corporation:					
N/A				The new		
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associate	ation "Corp," "Inc," or	"Co". A professional c	ncorporated" or the orporation name m	e abbreviation · ust contain the		
B. Enter new principal office address,	2929 E COM	MERCIAL BL	√ D			
(Principal office address MUST BE A ST	PH-E	PH-E				
		FORT LAUI	DERDALE, F	<u>- L</u>		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST (· .		
						
D. If amending the registered agent an new registered agent and/or the new			he name of the			
Name of New Registered Agent	N/A					
	(Florida	street address)	<u> </u>			
Now 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

(City)

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 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		N/A		_			,
Add							
Remove							
2) Change	,	N/A		_	,		
Add		•••		<i>,</i> ···`			
Remove						<u> </u>	
3) Change		<u>N/A</u>					
Add						· 	
Remove							
4) Change		<u>N/A</u>		<u>-</u>			
Add							
Remove						<u></u>	
5) Change		N/A		-			
Add				,			
Remove							
6) Change		N/A					
Add							
Remove							

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cellation of issued shares,
e amendment itself:
,

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The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable: OCTOBER 3, 2014	_
(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 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.	
Dated 10/03/14	
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)	
TIMOTHY S HART CPA	
(Typed or printed name of person signing)	•
SECRETARY	
(Title of person signing)	_