P/4000 050292

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COVER LETTER

Division of Corporations NAME OF CORPORATION: MG Property Solutions Corp P14000050292 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Armando Miranda Sanchez Name of Contact Person MG Property Solutions Corp Firm/ Company 24644 SW 110th Ave Address Homestead FL 33032 City/ State and Zip Code armandito.miranda@yahoo.es E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786) 234-3205

Area Code & Daytime Telephone Number Armando Miranda 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)

Mailing Address

TO: Amendment Section

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

Articles of Amendment to Articles of Incorporation of

MG Property Solutions Corp (Name of Corporation as currently filed with the Florida Dept. of State) P14000050292 (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 <u>MUST BE A STREET ADDRESS</u>) 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: 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, 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.

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)	Title	Name	<u>Addres</u> s
1) Change	P	Marien Castellanos	11331 SW 238 ST
Add			Homestead FL 33032
X Remove			
2) Change	D	Jose E Garcia Felipe	24644 SW 110th ave
Add			Homestead FL 33032
X Remove			
3) X Change	P	Armando Miranda Sanchez	24644 SW 110th ave
Add		,	Homestead FL 33032
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	 		
Add			
Remove		•	

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
Transfer 100% of the shares to Armando Miranda Sanchez

7/26/2016	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
7/26/2016 Effective date if applicable:	
(no more than 90 days after amendment file do	nte)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the a by the shareholders was/were sufficient for approval.	mendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendment.	ving statement nent(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 adopted by the board of directors without shareholder action and action was not required.	1 shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and sha action was not required.	reholder
Dated 07/26/2016	
Signature July S	
Signature(By a director, president or other officer – if directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, component of appointed fiduciary by that fiduciary)	
Armando Miranda Sanchez	
(Typed or printed name of person signing)	
P	
(Title of person signing)	