Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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3 :: -	To:	Division of Corporations Fax Number : (850)617-6380				
	From:	Account Name : RENNERT, VOGEL, MANDLER & RODRIGUEZ, P.A, Account Number : 076103002011				
	• •	Phone : (305)577-4163 Fax Number : (305)373-0791				

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

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COR AMND/RESTATE/CORRECT OR O/D RESIGN MARKET GROVE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

AUG '5 2021 S. PRATHER

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

Articles of Amendment Articles of Incorporation

	Articles of Ame	eudment	^	The state of the s
	to Articles of Incor			E 2
	of	Pormion		
MARKET GROVE, INC.			ران بازه	1 5 O
(Name o	of Corporation as currently	filed with the Florida Dep	t. of State)	ASI F
P14000081000				700 40
	(Document Number of C	Corporation (if known)		The state of the s
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Plorida Statutes, this FI	orida Profit Corporation &	dopts the following amends	nent(s) to
A. If amending name, enter the new n	ame of the corporation:			
			The ne	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A	mpany," or "incorporated" professional corporation п	or the abbreviation "Corp. tame must contain the wo	," rd
B. Enter new principal office address, (Principal office address MUST BE A S				-
C. Enter new mailing address, if appl (Mailing address MAY BE A POST				· - -
D. If amending the registered agent an new registered agent and/or the ne		ss in Florida, enter the na	ne of the	
	Alexa Abril			
Name of New Registered Agent				
	5814 Sunset Drive			
	(Florida stree	i address)		
New Registered Office Address:	South Miami		, Florida 33143	_
	(C	City)	(Zip Code)	
New Registered Agent's Signature, if a I hereby accept the appointment as regist		th and aggept the obligation	is of the position.	
		<i>[[]</i> .		
	Signdfure of New Reg	istered Agent, if changing		

Example:

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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>	PT John Doe					
X Remove	<u>v</u>	Mike Jones					
X Add	<u>v2</u>	Sally Smith					
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s				
1)Change	D	Gary Tie-shue					
Add Remove							
2) X Change	VSTD	Camille Tie-Shue					
Add							
Remove 3) Change	PD	Alexa Abril					
X Add			4866 SW 72 AVE.				
Remove			Miami, FL 33155				
4) Change							
Add							
Remove			 .				
5) Change							
A. dd							
Remove			 -				
δ)Change							
Add							
Remove							

(Attach addit	g or adding addit Honal sheets, if ne	nonal Artici ecessary).	(Be specific)	inge(s) here:			
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		<u> </u>	·				
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							. <u>. </u>
					 		
							
							
If an amend	dment provides f s for implementin	or an excha	inge, reclassi	lfication, or ce	ncellation of i	ssued shares,	
(if not	applicable, indica	ate N/A)	difficat it act	contained in	the amenanci	it itstii.	
/A							
	<u> </u>			<u> </u>		,	
		-					

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The date of each amendment(s) adoption:	_, if other than	the	
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 a document's effective date on the Department of State's records.	not be listed as	the	
Adoption of Amendment(s) (CHECK ONE)			
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and a action was not required.	shareholder		
☐ 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	TALLAHASSEE, FESAIRE		たこのプ
President, Director			
(Title of person signing)			