P14000085916

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL.		
(Bu	isiness Entity Nai	me)		
(Do	ocument Number))		
Certified Copies	_ Certificate:	s of Status		
Special Instructions to	Filing Officer:			

Office Use Only



100287345551

06/30/16--01016--009 **35.00



UL O 6 2016 C MCNAIR

COVER LETTER

TO: Amendment Section Division of Corporations

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: MAG INFINITY GROUP, INC.
DOCUMENT NUMBER: P14 0000 85 916
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MARCELO A GAMARRA Name of Contact Person
MAGINFINITY GROUP TNC. Firm/Company
2327 WEST 66 PLACE, UNIT 203
HIALEAH FLORIDA 33016
City/ State and Zip Code MARCELO & MABINFINITY INC. COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MARCELO GAMARRA at (786) 442-6727 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 Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address

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

Articles of Amendment Articles of Incorporation

MAGINFINITY GROUP, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P14000085916

(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, th its Articles of Incorporation:	is Florida Profit Corporation adopts the following amenda
A. If amending name, enter the new name of the corporation:	
AVA	The ne
name must be distinguishable and contain the word "corporal "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	dress in Florida, enter the name of the
Name of New Registered Agent N/A	·
(Florida .	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ages I hereby accept the appointment as registered agent. I am familia	
<u> </u>	
Q	

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.

Example: X Change	PT John I	<u>Ooe</u>	
X Remove	V Mike	Jones .	
_X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove	P <u>S</u>	MARCELO GAMARRA	2327 WEST GET PLACE UNIT # 203 HIALEAH, FLORIDA 33016
2) Change Add Remove	TQV	RONJ, ALANIZ	2327 WEST 66TH PLACE UNIT \$ 203 HIALEAH, FLORIDA 33016
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Arti	cles, enter change(s) here:
(Attach additional sheets, if necessary).	
WA	,
	- 1271
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
KI/K	
N/A	

The date of each amendment(s) adoption: JUNE 277, 2016	, if other than the
Effective date if applicable: TUNE 27th 2016 (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 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 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.	
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)	_
MARCELO GAMARRA (Typed or printed name of person signing)	
PRESIDENT, SECRETARY & REGISTERED F	1GENT