P1500000000854

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-	UP WAIT MAIL
	(Business Entity Name)
	(Document Number)
Cartified Conjes	Cartificates of Status

Special Instructions to Filing Officer:

Mabel Rumanicik

Advised Changing

Mew Officer:

To President (1)

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MOCLAMAR CO	RP				
DOCUMENT NUMBER: P15000006854						
The enclosed Articles of	The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all corres	pondence concerning this mat	ter to the following:				
	MABEL ROMANIUK					
-		Name of Contact Person				
	MABEL ROMANIUK & ASSOCIATES PA					
-		Firm/ Company				
	1689 NE 123RD ST	}				
-		Address				
	NORTH MIAME FLORIDA	33181				
-		City/ State and Zip Code	 			
MARI	ELROMANIUK@BELLSOU	TH NET				
.MADI	_	ed for future annual report r	notification)			
	E man address. (to be as	is a for future united report.	ionneumon,			
For further information	concerning this matter, pleas	se call:				
MABEL ROMANIUK		305 at (893-2669			
Name of Contact Person Area Code & Daytime Telephone Number		le & 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 & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address			Address			
Amendment Section Division of Corporations		Amendment Section Division of Corporations				
P.O. Box 6327			Building			
Tallahassee, FL 32314		2661 Ex	secutive Center Circle			
		Tallaha	ssee, FL 32301			

Articles of Amendment to Articles of Incorporation of

MOCLAMAR CORP

(Name of Corporation as current	tly filed with the Florida Dept. of State)
P15000006854	·
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," 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>)	
	1
C. Enter new mailing address, if applicable:	i .
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	>0
	9.2
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
	_ မွ
Name of New Registered Agent	<u> </u>
/Florida S	treet address)
New Registered Office Address:	(City) , Florida (Zip Code)
	(M) smith
New Registered Agent's Signature, if changing Registered Agen	
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 <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 Doc		
X Remove	<u>V</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	P	KARINA CONDE	2069 NE 123RD ST	
Add Remove		,	NORTH MIAMI FL 33181	
2) Change	P	CHAMPS GROUP LIMITED	2069 NE 123RD ST	
X Add		1	NORTH MIAMI FL 33181	
Remove		1		
3) Change		<u>.</u>		
Add		1		
Remove				
4) Change				
Add				
Remove		1		
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Articles, enter change(s) h (Attach additional sheets, if necessary). (Be specific)	
	1
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	l.,
If an amendment provides for an exchange, reclassification, provisions for implementing the amendment if not contains	or cancellation of issued shares, ed in the amendment itself:
(if not applicable, indicate N/A)	The state of the s
	-
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption:	, if other than the
fate this document was signed.	·
Effective date <u>if applicable</u> :	
(no more than	90 days after amendment file date)
Note: If the date inserted in this block does not meet the appl document's effective date on the Department of State's records.	icable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval.	ne number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders th must be separately provided for each voting group entitled to	
"The number of votes cast for the amendment(s) was/we	ere sufficient for approval
by(voting group)	,"
(voting group)	1
The amendment(s) was/were adopted by the board of director action was not required.	s without shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators wi action was not required.	thout shareholder action and shareholder
Dated 7/26/17 Signature X	
(By a director, president or other off selected, by an incorporator – if in tappointed fiduciary by that fiduciary	
Kazino	I name of person signing)
(Typed or printed	I name of person signing)
Pres.	drit
(Title	of person signing)