P15000036086

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: T.M.A.B. INVESTMENTS Group, Corp DOCUMENT NUMBER: <u>P 1500036086</u> The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company Kissimmee, Fl Address City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407) 766 5972

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 is enclosed)

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

Articles of Amendment

to

Articles of Incorporation

of

T.M.A.B. INVESTMENTS ((Name of Corporation as current)	GROUP. CORP y filed with the Florida Dept. of Stat	te)		
P15000036086	f Corporation (if known)			
(Document Number of	(if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the	following	amendn	nent(s) to
A. If amending name, enter the new name of the corporation:				
N/A name must be distinguishable and contain the word "corporation"			The ne	2W
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	Co". A professional corporation na	or the abo	breviatio ontain ti	on he
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A			-
			19	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)	N/A		DEC 11	7
				177 - (**)
		17.1	:7= -	- 12-
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address		- ,	ပီး တ	-)
Name of New Registered Agent N/A				
(Florida str	reet address)			
New Registered Office Address: N/A	, Florida	1		
	(City)	(Zip C	ode)	-
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar v		position.		
, 				
Signature of Nove R	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	<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>	Address
1) 🔀 Change	_A	Margarita E. Barrantes	3 2635 Quarterdock
Add		v	COURT Kissimme, FL
Remove			34743
2) Change			<u> </u>
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
O CL			
6) Change			
Add			
Remove			

<u>If amending or adding</u> (Attach <i>additional sheet</i>	additional Articles, enter change(s) here: s. if necessary). (Be specific)
N/A	
	•
,,,_	
	•
	_
If an amendment prov provisions for implen (if not applicable,	ides for an exchange, reclassification, or cancellation of issued shares, nenting the amendment if not contained in the amendment itself: indicate N/A)
	•
	

The date of each amendment(s) adoption:date this document was signed.	04/21/2015	, if other than the
Effective date if applicable:	04/21/2015 (no more than 90 days after amendment file o	late)
Note: If the date inserted in this block does document's effective date on the Department o	not meet the applicable statutory filing requirer	
Adoption of Amendment(s) (CI	HECK ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the approval.	amendment(s)
	ne shareholders through voting groups. The following group entitled to vote separately on the amena	
"The number of votes cast for the ame	endment(s) was/were sufficient for approval	
by	oting group)	
,	board of directors without shareholder action a	nd shareholder
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action and sh	nareholder
Dated	2019	
Signature Likecce	Mount	
(By a director, pre selected, by an inc	sident or other officer – if directors or officers heorporator – if in the hands of a receiver, trustee, by by that fiduciary)	
	iffany Barrantes (Typed or printed name of person signing)	
	President	
	(Title of person signing)	