P 150000 73190

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C. GOLDEN

JUN 1 3 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Masunmen Inc.					
DOCUMENT NUME						
	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	Oredis Quintana Ross					
	Name of Contact Person					
		Firm/ Company				
	1750 West 60 Street					
		Address				
	Hialcah Fl. 33012					
		City/ State and Zip Code	:			
yesse(@rjdpa.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	s concerning this matter, pleas	se eall:				
Yessenia Perez		at (<u>305</u>	444-7181			
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	ortment of State:			
S35 Filing Fee	☐S43.75 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 Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building				

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

FILED 2017 JUH-8 AMTI: 33

Masunmen, Inc

(Name of Corporation as currently filed with the Florida Dept. of State) P15000073190 (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.4," 1750 West 60 Street Apt#2 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Hialcah, FL 33012 C. Enter new mailing address, if applicable: 1750 West 60 Street Apt#2 (Mailing address MAY BE A POST OFFICE BOX) Hialeah, FL 33012 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: Oredis Quintana Ross Name of New Registered Agent (Florida street address) 1750 West 60 Street Apt#2 Hialeah New Registered Office Address: (City) 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.

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	Address			
1) Change	Р	Alberto Lemos	17 W 19 Street			
Add			Hialeah FL 33010			
Remove			· · · · · · · · · · · · · · · · · · ·			
2) Change	P	Oredis Quintana Ross	2445 W 70 Street			
XAdd			Hialeah FL 33016			
Remove						
3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

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f an amendment provid	des for an exchan	ge, reclassificati	on, or cancellation	on of issued share	28,
provisions for impleme (if not applicable, v	enting the amendi adjects M/A)	ment if not conta	tined in the ame	ndment itself:	
tij ma appatetiene, n	nuit int 17771				
	 				
					<u> </u>

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: N C (no more than 90 days after amendment for the second seco	île date)
Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records.	tirements, 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 east for by the shareholders was/were sufficient for approval.	the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the an	
"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 was not required.	on and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action as action was not required.	nd shareholder
Dated	
Signature (A)053	
(By a director, president of other officer – if directors or officer	
selected, by an incorporator - if in the hands of a receiver, tru	stee, or other court
appointed fiduciary by that fiduciary) ONEDLS ROSS	Qualina
(Typed or printed name of person signing)	Pomisini
Precioent	
(Title of person signing)	