P15000100600

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Jos aprén

COVER LETTER

TO: Amendment Section Division of Corporations		.:	
NAME OF CORPORATION	MG WILTON MA	NORS INC.	
DOCUMENT NUMBER:	P15000100600		
The enclosed Articles of Amen	dment and fee are su	bmitted for filing.	1
Please return all correspondence	e concerning this ma	tter to the following:	
	МАЛО МІКЕ	ALLADINA	
		Name of Contact Perso	n
•	MG WILTON	MANORS INC.	
· 	······································	Firm/ Company	
	828 WEST O	AKLAND PARK BLVD.	
`		Address	
	FT. LAUDERI	DALE, FL. 33311	
	<u></u>	City/ State and Zip Cod	е
•	•		· .
		ССТ@ҮАНОО.СОМ	
E-n	nail address: (to be us	sed for future annual report	notification)
For further information concern	ing this matter, pleas	e call:	
MAJID MIKE ALLADINA		at (305	546 - 9800
Name of Contac	t Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the follo	owing amount made	payable to the Florida Depa	artment of State:
	43.75 Filing Fee & ertificate 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 Tallahassee, FL 32314		Ameno Divisio Cliftor 2661 E	Address Iment Section on of Corporations a Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

MG WILTON MAR	NORS INC.	•	٠.
(Name o	of Corporation as currently fil	ed with the Florida Dept. of State)	
P15000100600			
	(Document Number of Con	poration (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Flor	ida Profit Corporation adopts the following	ng amendment(s)
A. If amending name, enter the new no	ame of the corporation:		
3			The ∩ new
"Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa B. Enter new principal office address. (Principal office address MUST BE A S C. Enter new mailing address, if applia (Mailing address)	ation "Corp," "Inc," or "Co" tion," or the abbreviation "P.A. if applicable: TREET ADDRESS)		bbrevi an on
D. If amending the registered agent an new registered agent and/or the new		n Florida, enter the name of the	
Name of New Registered Agent	MAJID MIKE ALLADINA		
,	1900 N BAYSHORE DRIVE	JNIT 4601	_
	(Florida street a	ddress)	_
New Registered Office Address:	MIAMI	, Florida 33132	
New Registered Agent's Signature, if c	(City) (Zip	Code)
		and accept the obligations of the position.	
	Africa	Dona	<u>,</u> _
	Signthune of New Regis	tered Agent, if changing	

hddress of each Office (Attach additional shee Please note the officer/officer) P = President; V = Vice Executive Officer; CFO held. President, Treasu Changes should be note	r and/or I ts, if neces director tit e Presiden) = Chief rer, Direct ed in the fo	Director lesary) The by the part; T= Tre Financial Tre Tre Tre Tre Tre Tre Tre Tr	first letter easurer; S Officer. be PTD. nanner. Con, Sally S	ed: of the off = Secreta If an offi Currently Smith is no	ice title: ury; D= D cer/direct John Doe	irector; i or holds is listed (TR= Tr more th as the F	director being removed and title, name, and nustee; $C = Chairman$ or $Clerk$; $CEO = Chief$ han one title, list the first letter of each office CST and Mike Jones is listed as the V . There is hould be noted as John Doe, PT as a Change,
X Change	PT	John D	<u>oe</u> .	• • • •				
X Remove	<u>V</u>	Mike Jo	ones					
_X Add	<u>sv</u>	Sally Si	mith			•		
Type of Action (Check One)	Title		Name					Address
1) Change	P		AMERI	CO PEDI	ROSA			1447 LOON CT
Add J				_			- 	HOMESTEAD
X Remove						••		FL. 33035
2) Change	P		МАЛО	MIKE AI	LADINA			1900 N BAYSHORE DR
X Add							,	UNIT 4601
Remove								MIAMI FL. 33132
3)Change		_					_	
Add			\$ 6 · · ·	î.		₹4 4	.:. <i>!</i>	Allegan (San Araba)
Remove							;	·
4) Change				. ,	•			
Add		_				· 	_	,
Remove								
5) Change		-				i ka		
Add								
Remove			•					
6) Change		<u>-</u>		<u> </u>				
Add					•			
Remove								

E. If amending or adding additional Articles, enter change(s) here:	. •	•
(Attach additional sheets, if necessary). (Be specific)		
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	,	,
		
<u> </u>	· · · · · · · · · · · · · · · · · · ·	
 		
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		,
	4.4 .	
F. If an amendment provides for an exchange, reclassification, or cancellation of provisions for implementing the amendment if not contained in the amendment (if not applicable, indicate N/A) EFFECTIVE APRIL 18TH 2016 THE NEW PRESIDENT MAJID MIKE ALLADI	nent itself:	THE SHARE
OF MG WILTON MANORS INC. MR. ALLADINA WILL ALSO ASSUME THE	ROLE OF THE REGISTE	RED AGENT
OF THE COMPANY		
HANIF MERALI WILL CONTINUE AS VICE PRESIDEN WITH AN OWNERS	HIP OF 10% OF THE CON	MPANY'S
SHARES		
EFFECTIVE APRIL 18TH, 2016 AMERICO PEDROSAWILL NO LONGER OW	N ANY SHARES IN MG	WILTON
MANORS INC AND WILL NO LONGER REPRESENT OR MAKE ANY DECIS	IONS ON BEHALF OF	
MG WILTON MANORS INC.		

The date of each amendment(s) adoption:, if other than t
date this document was signed.
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 not be listed as a document's effective date on the Department of State's records.
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.
APRIL 18TH, 2016
Dated
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)
MAJID MIKE ALLADINA
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)