P160000 37984

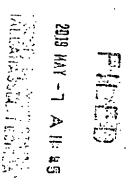
(Requestor's Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

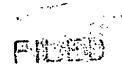
NAME OF CORPO	RATION: THE KESROG I	NVESTMENT GROUP CO	ORP	
	BER: P16000037984			
The enclosed Articles	of Amendment and fee are s	submitted for filing.		
Please return all corre	spondence concerning this m	atter to the following:		
	KENIA MARTIENZ			
		Name of Contact Perso		
	THE KESROG INVESTME		on	
		Firm/ Company		
	13058 SW 133 CT			
		Address		
	MIAMI, FL 33186			
		City/ State and Zip Coo	le	
DOR	ALFIRM@GMAIL.COM			
-	-	sed for future annual report	notification)	
		• •	,	
For further information	concerning this matter, plea	se call:		
KENIA MARTINEZ		305	757-8656	
Mama	f Contact Person	at () 252-8656 de & Daytime Telephone Number	
14atile 0	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)	
	ing Address ndment Section		Address ment Section	

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment to Articles of Incorporation of



THE KESROG INVESTMENT GROUP CORP

(Name of Corporation as current)	y filed with the Florida Dept. of State) A 11. 19 5
P16000037984	2019 HAY -1- A IF 45
	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this μ its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
KESROG INVESTMENT GROUP CORP	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "I	Co". A professional corneration name must contain the
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
. If amending the registered agent and/or registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	e addicas)
	a duaress)
New Registered Office Address:	. Florida
	Aty) (Zip Code)
ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar will	th and accept the obligations of the position.
Signature of New Reg	sistered 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: <u>X</u> 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>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	<u> </u>		
Remove			
Keliove			
6) Change			
Add			
Remove			

amending or adding additional Art ttach additional sheets, if necessary).	(Be specific)
·	
	· · · · · · · · · · · · · · · · · · ·
an amenument provides for an excha	inge, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	dment if not contained in the amendment itself:
(y not applicable, material tox)	
· · · · · · · · · · · · · · · · · · ·	
	·

The date of each amendment(s) adopti date this document was signed.	on:	, if other than the
· ·		
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departn	does not meet the applicable statutory filing requirements, this date tent of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of votes cast for the amendment(s) nt for approval.	
☐ The amendment(s) was/were approved must be separately provided for each	the shareholders through voting groups. The following statemen voting group entitled to vote separately on the amendment(s):	t
"The number of votes cast for th	e amendment(s) was/were sufficient for approval	
by	(voting group)	
_		
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
Dated 513)	9	
Signature Klll	ea flacture	
(By a directo	r, president or other officer - if directors or officers have not been	
	an incorporator – if in the hands of a receiver, trustee, or other court luciary by that fiduciary)	
¥	CTyped or printed name of person signing)	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	