P16000080989

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COVER LETTER

TO: Amendment Section

2811 SEP 25 AM 107 28 Division of Corporations AMF ENTERPRISES CORP NAME OF CORPORATION: P16000080989 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ANGELICA M. FERNANDEZ Name of Contact Person Firm/ Company 545 S. E. 8th Street Address Hialeah FL 33010 City/ State and Zip Code richband@bellsouth.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Angelica M. Fernandez at (305) 322-7029 Area Code & Daytime Telephone Number Name of Contact Person 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 Filling Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment Articles of Incorporation of

AME ENTERPRISES CORP.

(Name of Corporation as currently filed with the Florida Dept. of State)

Articles of A	Amendment State St
to	
Articles of In of	corporation (2)
AMF ENTERPRISES CORP	ن. حو
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P16000080989	
(Document Number c	of Corporation (if known)
rrsuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
. If amending name, enter the new name of the corporation:	
ame must be distinguishable and contain the word "corporation	on," "company," or "incorporated" or the abbreviation
Corp., " "Inc.," or Co.," or the designation "Corp," "Inc." or ' ord "chartered," "professional association," or the abbreviation	"Co" A professional corporation name must contain the
	595 East 9th Street
. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
	Hialeah FL 33010
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	595 East 9th Street
(Franting matres) STATE A POST OFFICE BOX)	
(Stating dates) SEAT BE A POST OF PICE BOX)	Hialeah Fl. 33010
(Standing dauress State Be a Post Of Pice Box)	Hialeah FL 33010
o. If amending the registered agent and/or registered office add	lress in Florida, enter the name of the
. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	lress in Florida, enter the name of the s:
). <u>If amending the registered agent and/or registered office add new registered agent and/or the new registered office address</u>	lress in Florida, enter the name of the
 If amending the registered agent and/or registered office add new registered agent and/or the new registered office address Name of New Registered Agent 	lress in Florida, enter the name of the s:
. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address Name of New Registered Agent	lress in Florida, enter the name of the s: rect address)

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	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) XX Change	ŀ	ANGELICA M FERNANDEZ	545 S.E. 8th Street
Add			Hialeah FL 33010
Remove			
2) Change	1-1-1-1		
Add			
Remove			
3) Change			A
Add			
Remove			
4) Change	 -		
Add			·
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

<u> Lamending or adding additional Arti</u> Attach <i>additional sheets, if necessary</i>),	(Be specific)
	
<u></u>	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate NA)	

	09/15/2017	
The date of each amendment(s) ad	eption:	, if other than the
date this document was signed.		
nee Aee	09/15/2017	
Effective date <u>if applicable</u> :	tno more than 90 days after	amendment file date)
Note: If the date inserted in this b document's effective date on the De		ry filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of vificient for approval.	otes cast for the amendment(s)
	roved by the shareholders through voting grach voting group entitled to vote separat	
"The number of votes east	or the amendment(s) was/were sufficient (for approval
by	(voting group)	"
	(voting group)	
The amendment(s) was/were ado action was not required.	oted by the board of directors without shar	cholder action and shareholder
☐ The amendment(s) was/were ado action was not required.	oted by the incorporators without sharehol	der action and shareholder
DatedSignature	19 dicart ornande	
	rector, president or other officer - if direct	
	by an incorporator if in the hands of a ed fiduciary by that fiduciary)	receiver, trustee, or other court
аркин	id nobelary by that noderary)	
	Angelica M. Fernandez	
	(Typed or printed name of pers	on signing)
	President	
	tTitle of person ciu	enine)