## P17000008659

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations							
NAME OF CORPORATION: FMG AWN	INGS, INC.	i					
P17000008659							
DOCUMENT NUMBER:		<del></del>					
The enclosed Articles of Amendment and fee	are submitted for filing.	!					
Please return all correspondence concerning th	is matter to the following:						
FRANCISCO MATA C	GARCIA						
Name of Contact Person							
	Firm/ Company						
6760 SW 11 STREET							
Address							
PEMBROKE PINES, F	TL 33023						
	City/ State and Zip Cod	3					
MARFY.MATA@GMAIL.C	ОМ						
E-mail address: (to	be used for future annual report	notification)					
		,					
For further information concerning this matter.	, please call:	ı					
FRANCISCO MATA GARCIA	at (	440-8182					
Name of Contact Person	Area Co	de & Daytime Telephone Number					
Enclosed is a check for the following amount in	nade payable to the Florida Depa	ertment of State:					
S35 Filing Fee	<del>-</del>	☐S52.50 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 Building executive Center Circle assee, FL 32301					

## Articles of Amendment to Articles of Incorporation of

FMG AWNINGS, INC.

FILED

2017 JUL 25 PM 2: 54

(Name of Corporation as currently filed with the Florida Dept. of State) SSEE. FLORIDA P17000008659 (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: N/A 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.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) 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: N/A - REMAINS THE SAME Name of New Registered Agent 6760 SW 11 STREET (Florida street address) PEMBROKE PINES, FL 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 Johns 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	PT	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		1
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
I) Change		N/A		<u> </u>
Add				
Remove				İ
2) Change		N/A	 	
Add				[
Remove				<u>i</u>
3 ) Change		N/A	 	<u>.</u>
Add				1
Remove				<u> </u>
4) Change		N/A	 	
Add				
Remove				
5) Change		N/A		
Add				
Remove				<u>.</u>
6) Change		N/A	 	ļ
Add				
Remove				1

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
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f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
N/A	1
	<u> </u>
	<del></del>

	N/A		
The date of each amendment(s) ado date this document was signed.	otion:	<del>`</del>	, if other than the
per at the second	N/A		
Effective date if applicable:	(no more than 90 days after amen	dment file date)	<del></del>
Note: If the date inserted in this blo document's effective date on the Depart	ck does not meet the applicable statutory fili rtment of State's records.	ng requirements, this date w	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
■ The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of votes clent for approval.	cast for the amendment(s)	
	ved by the shareholders through voting groups ch voting group entitled to vote separately on		
"The number of votes cast fo	the amendment(s) was/were sufficient for ap	proval	
bv	(voting group)	."	
·	(voting group)		
☐ The amendment(s) was/were adoptaction was not required.	ed by the board of directors without sharehold	der action and shareholder	
☐ The amendment(s) was/were adopted action was not required.	ed by the incorporators without shareholder ac	ttion and shareholder	
	/17		
Dated		i 1	
Signature Will	A TES		
selected.	ctor, president or other officer - if directors or by an incorporator - if in the hands of a receive fiduciary by that fiduciary)		_
F	RANCISCO MATA GARCIA		
_	(Typed or printed name of person sig	gning)	
P	RESIDENT	I	
_	(Title of person signing)	<u></u>	<del> </del>